

JAMES "BUTCH" ...

[illegible]

OFFICE	DATE
Cincinnati SAC	2-26-56
Training & Inspection	9-16-56
Inspector	4-7-57
WFO as SAC	5-11-59
Chicago as SAC	11-20-60
INSPECTOR IN CHARGE INSPECTION DIVISION	10-1 ⁶ -62
ASSISTANT DIRECTOR	1-4-63
SPEC. INVEST. DIV.	12-1 ⁵ -64
AS ASS'T DIR.	12-18-64
RETIREMENT (20 YEARS INVESTIGATIVE EXPERIENCE)	10/1/71
Added & Sec. Chk. L. Tag -	12-27-6
DO NOT WRITE IN THESE SPACES	
HISTORICAL SECTION	
NATIONAL ARCHIVES	
JAN 4	

INVESTIGATIVE EXPERIENCE)

ON

DO NOT LEND
HISTORICAL
NATIONAL ARCHIVES

INVESTIGATIVE EXPERIENCE)

ON JUNE 21, 1943

[illegible]

DATE	RATING	
1947	Very Good	
1948	VERY GOOD	
1949	Very Good	
1950	Very Good	
1951	Very Good	
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NAME JAMES HENRY GALE

DATE

11-29-39	ENTERED ON DUTY Temporary	DATE	EFFICIENCY RATING
1-29-40	Permanent		
11-29-39	POSITION Typist		
1-29-40	Clerk		
11-29-39	WHERE ASSIGNED Cleveland, Ohio		

ENTRANCE GRADE ENTRANCE SALARY

CAF-2 \$1440

SALARY CHANGES

DATE	TESTS			DATE	GRADE	SALARY
	STENOGRAPHIC	TYPING	TELETYPE			
Entrance		37.5%		1-29-40	CAF-3	\$1620
6-5-40		81%	97%	10-1-41	CAF-2	\$1680
Dec. 1940		98%	No Grade	4/1/43	CAF-3	\$1740
June 1941		93½%	96½%			
Aug. 1941		98%	90%			
Nov. 1941		98½%	98½%			
Feb. 1942		99%	95½%			
Aug. 1942		97%	92%			
Jan. 1943		96½%				

UNITED STATES GOVERNMENT

Memorandum

TO : Mr. Callahan

DATE: 9-28-71

FROM : H. N. Bassett

SUBJECT: JAMES H. GALE

Former Assistant Director
Special Investigative Division
Veteran
(Retired Effective 10-1-71)

PERMANENT BRIEF

Entered on Duty

Reported to Field

Military Leave

Retired

Last Grade and Salary

Last Salary Change

Age

Place of Birth

Marital Status

Education

Member of Bar

Language Ability

Office of Preference since 4-64

1971 Annual Performance rating

Firearms Ability

Outstanding Endorsers

Relatives in Bureau

11-29-39 - Typist

6-21-43 - Special Agent

10-14-43

10-16-44 to 3-27-46

10-1-71

GS-18, \$36,000

1-10-71 - Basic Increase

50 - Born 9-28-1921

Cleveland, Ohio

Married - 2 Children

Bachelor of Laws Degree

None

None

Seat of Government

OUTSTANDING

Qualified Instructor

None

Brother-in-law, SA [REDACTED]

EOD 6-12-61, GS-13, Washington

Field Office. Out-of-Service: b6

Brother, [REDACTED] Sister,

[REDACTED] Brother-

in-law, [REDACTED]

Offices of Assignment:

10-14-43

assigned

2-9-44

reported

7-21-44

reported

10-16-44

Military Leave

3-27-46

returned to duty

11-4-51

reported as ASAC

10-19-53

desig. SAC

3-2-55

reported as SAC

2-26-56

reported as SAC

9-16-56

reported

4-7-57

Inspector

5-11-59

reported as SAC

11-20-60

reported as SAC

10-16-62

Inspector-in-Charge

1-4-63

Assistant Director

12-15-64

Assistant Director

10-1-71

Retired

Dallas

Omaha

Cleveland

Cleveland

Anchorage

Anchorage

Richmond

Cincinnati

Training & Inspection Division

Training & Inspection Division

Washington Field

Chicago

Inspection Division

Inspection Division

Special Investigative Division

Tolson _____
Felt _____
Sullivan _____
Mohr _____
Bishop _____
Miller, E.S. _____
Callahan _____
Casper _____
Conrad _____
Dalbey _____
Cleveland _____
Ponder _____
Rosen _____
Tavel _____
Walters _____
Soyars _____
Tele. Room _____
Holmes _____
Gandy _____

LLD:gpt
(1)

Photo removed for
Newbold Dir 6

mad.
4/6/83

JAMES H. GALE
8/31/71

This employee entered on duty with the Bureau in the Cleveland Field Division on 11-29-39, as a Temporary Typist in Grade CAF-2, \$1440 and was promoted to the position of a Permanent Clerk in Grade CAF-3, \$1740 per annum. During this time his services were entirely satisfactory. On 6-21-43 he was appointed to the position of Special Agent in Grade CAF-9, \$3200 per annum.

At the conclusion of his training, Mr. Clegg said he presented a very good appearance, had a tremendous amount of enthusiasm and was a hard worker. He was above the average in intelligence, his attitude was excellent and it was believed that after receiving a reasonable amount of field experience he would develop into an above the average Agent in the field.

On 10-14-43 he was assigned to the Dallas Field Division. On 12-23-43, SAC Danner rated him GOOD and said he was plentifully imbued with force and aggressiveness, expressed himself in a very rapid manner, moved about actively and seemed to be intelligent. He was a good dictator, submitted good reports and it was believed that he would make a good witness since he expressed himself well. His handling of firearms had been satisfactory but he would need more training and experience before he could function on a dangerous assignment; however, he should be able to handle a physical surveillance without difficulty. He would need additional experience before he could be used in an unlimited capacity on contact work and at the present time he was inclined to permit his enthusiasm and aggressiveness to run away with him. It was noticeable at times when he was excited he was inclined to stutter somewhat in his speech. He had demonstrated initiative in handling assignments and had demonstrated above average ability in organizing and initiating investigations, had developed several new cases while handling investigations in cases assigned to him and SAC Danner believed that with experience and supervision he would develop rapidly in the Bureau.

On 1-28-44 SAC Danner rated him VERY GOOD and said he had shown remarkable improvement, as a matter of fact, he was one of the best new Agents that he (Danner) had worked with. He was a good dictator, it being noted that his completed reports needed very little supervision. It was the opinion he would make an excellent witness and could hold his own under cross examination, however it was felt he should receive additional training and supervision with firearms before being used on any type of dangerous work. He could handle a physical surveillance with assistance, his contacts with law enforcement officials had been well handled and he did not appear to have any difficulty with business contacts. He had shown ability to organize and initiate investigations of the ordinary type, would accept and discharge responsibility without too much supervision, was possessed of unbounded enthusiasm and took his assignments very seriously and was the type of Agent who worked ceaselessly on his investigations.

On 2-9-44 he was transferred to the Omaha Field Division. A manuscript prepared by this agent was submitted to the Bureau for consideration and by letter dated 3-29-44 SAC Maughen was advised that paragraph after paragraph had been copied from the Bureau release entitled "Juvenile Delinquency" and the Bureau

was desirous that Agent personnel, who were anxious to participate in speaking engagements, use their own initiative in preparing manuscripts for Bureau consideration, consequently he could not be approved on this occasion.

During an inspection of the Omaha Office in March, 1944, Inspector Scheidt said he appeared to be a very good Agent for his grade and length of service, made a good personal appearance, possessed initiative and aggressiveness and was rather youthful in appearance but he had self-confidence. It was recommended that he be given consideration for a salary increase.

On 3-31-44 SAC Naughten rated him VERY GOOD and said his appearance belied his age since he looked and acted older than he actually was, he had matured rapidly, was enthusiastic in his work, had outstanding qualities of resourcefulness, pursuing his investigations with force and aggressiveness. He was a very good dictator, was a fully competent witness and it was believed he would be adaptable to assignments of a dangerous character. His initiative and common sense lend themselves well to physical surveillances, he made an excellent impression on law enforcement officials, business and professional persons and at the same time was able to conduct himself in a successful fashion in underworld groups. He had been assigned to matters of a delicate nature, which he had handled discreetly and well, was fully qualified in handling security cases which had arisen and he was also charged with developing white slavery information and had done an outstanding job. It was believed he had latent administrative ability and with further experience in the field he might well be considered for experience along this line.

In May, 1944, the Bureau received a letter from Mrs. Beck, this Agent's mother-in-law, stating that he was having marital trouble with his wife. Mrs. Beck stated she thought the Bureau might be able to set him straight on the matter of credit obligations of Government employees and the importance of paying honorable debts, even though no one can garnishee any Government employee's salary. Agent Gale advised they lived together for three weeks, then his wife left him and returned to Cleveland. He stated he had endeavored to effect a reconciliation which was unsuccessful and had received numerous demanding letters from her attorney insisting that he pay various sums of money for expenses incidental to her obtainance of a divorce and also a \$100 a month for her support. He advised that his Counsel had informed him that there was no legal obligation to meet any of the financial demands of his wife or her family. Inasmuch as this appeared to be a private family squabble, the Bureau did not take any action.

On 6-1-44 SAC Naughten rated him VERY GOOD and said he had outstanding qualities of resourcefulness, pursuing his investigations with force and aggressiveness, was a very good dictator, was a fully competent witness and was considered adaptable to assignments of a dangerous character. His initiative and common sense lend themselves well to physical surveillances, he made an excellent impression on law enforcement officials, business and professional

persons and at the same time was able to conduct himself in a successful fashion in underworld groups. He had been assigned to Matters of a delicate nature which he had handled discreetly and well, was fully qualified in handling Security cases which had arisen and had done an outstanding job in developing white slavery information. It was believed he had latent administrative ability and with further experience in the field might well be considered for experience along this line.

He was transferred to the Cleveland Field Division on 7-21-44 at his request in order that he might spend as much time as possible before his induction with his mother and so that he might take care of certain personal affairs before going into the Armed Forces.

On 7-20-44 SAC Traynor rated him EXCELLENT and said he had unbounded enthusiasm for the Bureau's work, exercised good judgment in connection with his investigations, impressed one as being resourceful, capable and one who was amenable to discipline. He had handled various types of investigations and had acquitted himself creditably on these assignments, however, it was noticed that he was inclined to be a little careless with his dictation and it might be this carelessness carried itself over in a small degree into his investigations in that he attempted to do too much in too short a time.

On 8-7-44 SAC Fletcher rated him EXCELLENT and said he had continued to be very self-confident, assured, industrious, applied himself well and did not waste time. He was the type of employee who was inclined to have his volume above the average and it was obvious that he had made good progress, perhaps above average, in his grade. He was willing and ready to accept any and all types of assignments and it was indicated that he worked best under an overload.

On 10-16-44 he was placed on military leave without pay. On 7-1-45, as a result of a basic salary increase in pay, his salary was changed to \$3640 per annum in Grade CAF-9.

In July, 1945, this employee wrote to the Bureau to obtain some information as to the effect his application for a position of Special Service Officer in the State Department would have on his present relationship with the Bureau. He was advised by letter 8-1-45 that under existing regulations, it would be incumbent upon him in order to protect his reemployment rights with the Bureau to make application for reinstatement in his former position, ninety days after his honorable discharge from the armed forces and should he fail to do so and accept employment elsewhere, it would be necessary to remove his name from the rolls and accordingly, he would forfeit any reemployment rights which he might have.

He returned to duty with the Bureau on 3-27-46 and was assigned to the Cleveland Field Division. He requested to be assigned to the Cleveland Office because his widowed mother was not in the best of health and he had a brother fifteen years of age who needed his guidance.

On 6-7-46 SAC O'Conner rated him EXCELLENT and said he was considered conscientious, ambitious, aggressive and industrious and had performed his assignments in a highly satisfactory manner. He had applied himself vigorously to his investigations, was cooperative, had qualified in the use of firearms, had very readily adjusted himself upon return to his agent status and had a very good working knowledge of the Bureau's manuals and regulations. His paper work had required practically no supervision, his investigations had been found logical and thorough, his work was afforded immediate attention and his volume was above average. He appeared to be in good physical condition and available for any type of assignment and he had exercised initiative and good judgment in the handling of his work. On 6-30-46, he was reallocated to Grade CAF-10, \$3970 per annum.

Due to a basic increase in pay, effective 7-1-46, his salary was increased to \$4525.80 per annum.

On 11-13-46, SAC Richardson rated him EXCELLENT and said he had handled his contacts with the public and police officers in a most excellent manner, showed skill in the organization of his work and in the submission of investigative reports, was far above average in aggressiveness and industry which was reflected in an above average production of Bureau work and during recent weeks, he had worked on an important Theft from Interstate Shipment case and in this connection he had exhibited resourcefulness in the development of leads and in the carrying out of the investigation. He required a minimum amount of supervision in the handling of important assignments and there would be no hesitancy in using him on such matters. It was noted the Bureau was advised by letter in October, 1946 concerning an injury to the hearing received by this Agent in connection with firearms training. In this report SAC Richardson said his ability to hear conversational tones appeared to be perfectly normal and the injury did not seem to in any way impair his efficiency.

On 12-15-46 he was reallocated to Grade CAF-11, \$4902 per annum.

On 3-31-47 SAC Richardson rated him VERY GOOD and said he was a very good dictator, he was exceptionally industrious and aggressive, which was reflected in the production of an above-average amount of work.

He was considered for reallocation to Grade CAF-12, \$5905.20 per annum on 6-7-47; however, it was recommended that he be passed over inasmuch as he only received a very good rating, and it was recommended that he be reconsidered at a later date.

On 12-24-47 he was rated EXCELLENT by SAC Richardson.

On 2-8-48 he was reallocated to Grade CAF-12, \$5905.20 per annum.

During the Inspection of the Cleveland Office in July, 1948, Inspector Naughten said he was one of the more enthusiastic and intensive agents of the office.

As the result of a basic salary increase effective 7-11-48, his salary was increased to \$6235.20 per annum in Grade CAF-12.

On 8-11-48 SAC Brown rated him VERY GOOD and said he was a good investigator who was energetic and enthusiastic in carrying out his assignments. He had a better-than-average knowledge of the Bureau's rules and regulations and submitted investigative reports which required a minimum of supervision.

On 9-22-48 SAC Brown rated him VERY GOOD.

On 3-31-49 SAC Abbaticchio rated him VERY GOOD and said he had been very favorably impressed with the capabilities and prospects of this Agent and felt that as he continued to gain in experience, he might well be given a trial on administrative and supervisory work.

By memorandum dated 6-10-49 he was advised that he was now an approved Bureau speaker.

On 8-21-49 he received a Uniform Promotion to \$6474.60 per annum in Grade CAF-12.

He attended In-Service Training from 10-17-49 to 10-28-49.

As the result of a basic salary increase effective 10-30-49, his salary was increased to \$6600 per annum in Grade GS-12.

On 3-31-50 SAC Abbaticchio rated him EXCELLENT and said he got along quite well with his associates and was a very good contact man, both with business people and with peace officers. He was possessed of a great deal of initiative and resourcefulness, as demonstrated in his investigative efforts, and he was also quite aggressive, although inoffensively so. His firearms scores were above average; he was in good physical condition and was well qualified to take part in dangerous assignments. He was experienced on physical surveillances and was available for assignment wherever needed, although it should be noted he was in his office of preference and possessed many personal contacts locally which were of considerable value to the office. The SAC had been very favorably impressed with the work and development of this Agent and felt that he possessed definite supervisory potentialities. His over-all performance during the rating period indicated that his rating should be advanced to Excellent in comparison with others in his grade.

During the Inspection of the Cleveland Office in October, 1950, the Inspector (L. M. Chipman) said this man was a good conversationalist, quick thinker, had a very good personality, and an excellent knowledge of his duties. He appeared to be good timber for possible advancement in the future.

By memorandum dated 12-18-50 his SAC was advised that he was authorized to utilize the services of Agent Gale as a relief supervisor.

His daily average overtime for October, 1950 was 1 hour, for November was 46 minutes, for December was 2 hours 24 minutes, and for January was 1 hour 21 minutes.

On 2/18/51 he received a Uniform Promotion to \$6800 per annum in Grade GS-12.

On 3/31/51 SAC Abbaticchio rated him SATISFACTORY and stated he had done an excellent job in the handling of the bulk of the office confidential criminal informant and crime survey programs. He was an excellent dictator, he was experienced and able to handle more complicated investigations, he was a relief supervisor, a qualified speaker and in the SAC's opinion possessed very good supervisory possibilities. There were no limitations upon his availability for service wherever needed; however, it might be noted that Cleveland was his office of preference and that he possessed many personal local contacts of great value to the Cleveland Office. He was definitely one of the most valuable agents assigned in Cleveland and he was regarded as in the upper (Excellent) bracket of the Satisfactory category.

By letter dated 6/4/51 he was commended for the excellent manner in which he performed his duties in connection with the White Slave Traffic Act case involving Don Marvin Orr. The splendid investigation conducted by him contributed materially to the successful results accomplished.

On 7/8/51 he received a Basic Salary increase to \$7440 per annum in Grade GS-12.

By letter dated 7/19/51 he was awarded the Ten Year Service Award Key.

On 9/21/51 SAC Abbaticchio rated him SATISFACTORY and stated that the comments of the 3/31/51 report were accurate at the present time. He added that this Agent had done a thorough, dependable and painstaking investigative job upon all assignments given him.

He attended In-Service Training from 9/24/51 to 10/6/51.

On 10/2/51 the Director saw this Agent and stated he made a favorable impression, seemed to be intensely interested in his work and proud of the promotion he had received. The Director discussed with him generally some of the problems in Alaska, the necessity for tightening up in the administration of discipline in our service at the present time; and being alert to meeting security responsibilities of this Bureau in Alaska.

By memorandum dated 10/18/51 his SAC was advised that he was now approved by the Bureau as an administrative firearms man and he was authorized to conduct field firearms training for Special Agents.

On 11/4/51 he was transferred to the Anchorage Office as Assistant Special Agent in Charge.

By letter dated 11/13/51 he was advised that effective on 11/4/51 he would receive during his assignment outside the continental limits of the United States twenty-five per cent additional compensation as a cost of living allowance based on his present salary.

By memorandum dated 11/14/51 his SAC was advised that he was trained to assist on inspections October 15 and 16, 1951.

On 2-12-52 SAC Williams rated him SATISFACTORY and stated he had a very pleasing personality which enabled him to get along well with the public, he had functioned in the capacity of ASAC and as such, he had handled administrative duties and was in charge of the office during the absence of the SAC. In addition, he had handled more important investigative assignments. He was ambitious, enthusiastic, handled firearms well and the SAC would have no hesitancy whatsoever in assigning him to lead raids, make arrests and other duties involving personal danger. He had exhibited administrative and executive abilities, which abilities were being developed. He wanted to progress and was definitely an asset to the Bureau. He merited a rating in the Upper "excellent" bracket of the Satisfactory category.

On 3-31-52 SAC Williams rated him SATISFACTORY and stated that the comments of the 2-12-52 report were still applicable to the entire period of this annual performance rating.

His overtime for March, 1952, was 2 hours 49 minutes.

On 4-27-52 he was reallocated to Grade GS-13, \$8360 per annum, plus 25% cost of living allowance.

During an Inspection of the Anchorage Office in June, 1952, Inspector Simon said he presented a very good personal appearance, he had an easy personality, he created a good impression, and he appeared to be alert and intelligent. He was a sincere, conscientious worker, he was functioning satisfactorily, and he showed promise of continued development.

By memorandum dated 7-9-52 he was considered for Grade GS-14 reallocation; however, under the Whitten Amendment he was not eligible for GS-14 reallocation at this time inasmuch as he was reallocated to Grade GS-13 on 4-27-52. Accordingly, he was passed over to be reconsidered in April, 1953 when he would have 1 year in his present grade.

His overtime for August, 1952, was 3 hours 20 minutes.

On 11-28-52 SAC Williams rated him SATISFACTORY and said he made an excellent appearance, got along well with the public and had a definite ability to handle himself well in liaison work with law enforcement officials and the military. He definitely had executive and administrative ability and it was believed that he was excellent SAC material. As ASAC he handled administrative and executive duties in the office as well as participating in the more important investigative assignments. He had participated in surveillances, raids and arrests while in that office and had shown himself to be fully competent in that field. He was an excellent raid leader. He had an excellent knowledge of the Bureau's rules and regulations, responsibilities and aims. He was ambitious to progress and had the enthusiasm, forcefulness and initiative to progress. He was completely loyal to the Bureau and a definite asset to it. He was available for special and general assignment.

On 3-31-53 SAC Faisst rated him SATISFACTORY and said he presented an excellent appearance; he was particularly adept at handling relations with law enforcement officers and the military, and was exceptionally capable of appraising a set of facts, carefully weighing both the immediate and ultimate effect of contemplated action, and then adopting a course of action which was consistent with Bureau policy and entirely favorable to the Bureau. He had an excellent insight into all phases of field office administration, was fully competent at handling arrests, raids and surveillances, and was regarded as an excellent raid leader. He constantly seized the initiative and did not hesitate to make positive decisions. He definitely had executive and administrative ability, and it appeared that he was excellent SAC material. He was completely capable of handling the most involved and delicate investigative matters. He was extremely alert to the detection of new business and closely followed it in an aggressive fashion. He was rated an excellent dictator, had an excellent knowledge of Bureau policy, was ambitious and had sufficient initiative, forcefulness and enthusiasm to progress further in the service of the Bureau. He was completely loyal to the Bureau and a definite asset to it. He was available for special and general assignment.

Under date of 4-18-53 an anonymous communication was directed to the Bureau, postmarked at Washington, D. C. In its contents the writer stated it was imperative that a personnel inspection be conducted immediately in the Anchorage Office if the reputation of the Bureau was to be maintained in that area, since the two head officials at Anchorage "seemed to be building a dictatorship all their own." An inquiry was conducted into this matter by Inspector Brown with particular inquiry being made into the supervision of the Anchorage Office. As a result of this inquiry, it was the conclusion of Inspector Brown that the administration of the Anchorage Office was sound and that the prestige of the Bureau in Alaska was high.

By memorandum dated 4-23-53 he was considered for GS-14 reallocation but was passed over to be reconsidered upon receipt of the inspection findings and the findings with respect to the anonymous communication, which had not been received at that time.

His overtime for April, 1953, was 2 hours 42 minutes per day; he had no travel overtime.

During the inspection of the Anchorage Office in May, 1953, Inspector Brown said he was personable, experienced, enthusiastic and energetic. He was intelligent and had the confidence and respect of the personnel. His background as a former Chief Clerk should make him valuable as an administrator in any office. Cases handled by him were found to be in good shape. It was recommended that he be considered for further advancement in the Bureau. He was due for rotation back to the States after 11-4-53.

On 6-21-53 he was reallocated to Grade GS-14, \$9600 per annum.

On 10-5-53 the Director saw him, at which time the Director commented that he made an excellent personal appearance, had fine enthusiasm, seemed to be thoroughly conversant with his responsibilities as ASAC at Anchorage and the Director would rate him above average. The Director thought he had definite possibilities for advancement in the service. The Director was most favorably impressed with him in every way.

He attended In-Service Training from 10-5- to 10-16-53.

By memorandum dated 10-13-53 Mr. Tolson advised that he talked with ASAC Gale of Anchorage on 10-13-53 and he was very favorably impressed with him. Mr. Tolson advised that he had no problems, was entirely available for assignment, had had all of the types of training in the field and he felt confident that ASAC Gale could properly administer the Anchorage Office.

On 10-19-53 he was designated SAC at Anchorage.

By letter dated 10-26-53 he expressed his appreciation to the Director, for designating him as SAC in Anchorage.

On 11-17-53 SAC Faisst rated him SATISFACTORY and said as ASAC he handled administrative and executive matters, as well as participating in the more important investigative assignments. He had an excellent insight into all phases of field office administration, including established Bureau procedures, and evaluation and training of clerical and agent personnel. He was a qualified administrative firearms man and acted as instructor for both training and police school sessions. He was fully competent at handling arrests, raids and surveillances, and was regarded an excellent raid leader. He possessed the knack of quickly sizing up and analyzing investigative matters, and was completely capable of handling the most involved and delicate investigative matters.

In a letter to the Director dated 11-27-53 he advised that he had received dozens of highly commendatory remarks concerning his (The Director's) testimony before the Subcommittee on 11-17-53, from Anchorage civic leaders, businessmen, and just plain ordinary citizens. By letter dated 12-2-53 his letter of 11-27-53 was acknowledged.

A Memorandum dated 1-15-54 from Mr. Mohr reflected that the Director had requested that Gale's file be reviewed to determine whether he could be reallocated to Grade GS-15. It was noted that he was promoted to Grade GS-14 on 6-21-53. Under the provisions of the Whitten amendment, it was noted that it would not be possible to consider him for reallocation to Grade GS-15 until on or after June 21, 1954.

By letter dated 2-17-54 he was advised that the Bureau had reviewed carefully the results of the self-inspection of the Anchorage Office, and it was encouraging to note that the office space had been painted and new lights installed. It was noted that deadlines were missed in five of the twenty-five closed applicant-type cases reviewed. He must assure himself that every effort was being made to meet deadlines, and he should be extremely reluctant to accept inclement weather as an excuse for missing deadlines. The Bureau was pleased to note that his over-all delinquency for January had been reduced to 16.2% and that delinquency in security-type cases was 12.5%. It was vitally important that his office keep abreast of all types of subversive activity, not only in Ketchikan but in all parts of Alaska. The improvement in his criminal informant coverage was encouraging. As a relatively new SAC, it was imperative that he make it a point to know all important governmental and business officials in the Territory and that he be so closely in touch with the staffs of newspapers that no misunderstanding could arise concerning any phase of the Bureau's work. Each trip about the Territory should be planned to yield the maximum benefits to the Bureau in his contact program.

On 3-31-54 Mr. Glavin rated him SATISFACTORY.

During an Inspection of the Anchorage Office in June, 1954 Inspector Williams said he had been SAC in Anchorage since 10-15-53. He had taken a firm grip on all phases of administration in the Anchorage Office. He had made a good showing on statistical accomplishments for the first 10 months of the fiscal year of 1954 and had improved the maintenance of the office. He appeared to be developing satisfactorily. Recommendations: None. The various functions of the office were rated as follows:

PHYSICAL CONDITION AND MAINTENANCE	VERY GOOD
INVESTIGATIVE OPERATIONS.....	VERY GOOD
ADMINISTRATIVE OPERATIONS.....	VERY GOOD
PERSONNEL MATTERS.....	VERY GOOD
CONTACTS	VERY GOOD

On 6-28-54 a letter was directed to him, calling his attention to the various memoranda concerning the detailed findings of Inspector J. H. Williams. He was advised that he should take the necessary steps to make available sufficient closed file cabinet space for the filing of closed files so that they could be more easily utilized. He was instructed to follow closely the physical condition of the office in view of the ever present problem of dirt and mud which confronts him in Anchorage. He was advised to be constantly alert to any matters with a security ramification, and to maintain regular contact with the Seattle Office for developments from the Twelfth District Communist Party Headquarters inasmuch as Alaska itself was a part of that district. His improvement in criminal informant coverage was noted and was undoubtedly reflected in the favorable trend of the statistical accomplishments of his office during the first ten months of the fiscal year

1954. It was noted that errors of form in the case files reviewed were 5.8 per cent in pending investigations and 12.5 per cent in closed files reviewed. These were too high and he was advised to set up a program whereby both the Agent and clerical personnel receive adequate training and supervision to lower them. It was noted that three Agents assigned to Anchorage had not testified in Federal Court and one had not appeared before a Federal Grand Jury. He was advised to assign the work so that all Agents would get this valuable experience. He had not met all SAC Contacts and he explained this by stating that the five which he had not had the opportunity to meet were in remote sections and attempts thus far had been unsuccessful. He was advised that when circumstances and travel permit, he should meet these individuals and if they did not appear to be qualified as office contacts they should, of course, be deleted from the list. In addition, he should endeavor at every opportunity to enlarge upon the number of contacts emphasizing at all times, of course, quality. Although there was an increase of appearances by him and the ASAC before civic groups and other organizations, his speech program was not impressive. He was advised to give it his personal attention and make every effort to speak to representative groups throughout the Territory.

On 7-18-54 he was reallocated to Grade GS-15, \$10,800 per annum. In a letter to the Director dated 7-15-54 he expressed his gratitude for this promotion and assured that he would do everything in his power to merit the confidence placed in him.

By radiogram dated 12-22-54 he advised he would report for a two day conference 1-10-55 as instructed by the Bureau, and requested that he be granted five days and four hours of annual leave enroute to Washington. This request was approved.

On 1-10-55 the Director saw him and said he made a good personal appearance and the Director noted that he was impressed by his enthusiasm and alertness as to the problems prevailing in his office. The Director further stated that he discussed with him the necessity for keeping the delinquency to the lowest average possible; the need for increased accuracy, thoroughness and completeness in our investigative work; and the need for having the Agents spend as little time in the field offices as possible in order that they may be on road work. The Director said he called to his attention the fact that his office was closing a low number of cases per Agent and that this should be looked into by him. His statistical record was up in all respects and he had no Agents unavailable for assignment.

Memorandum dated 1-11-55 reflected that Mr. Gale had requested annual leave commencing 1-12-55, and extending through 1-25-55. This request was approved.

His daily average overtime for February, 1955 was 2 hours 34 minutes.

On 3-1-55 the Director saw this SAC and stated he was under orders of transfer to Richmond as SAC. The Director pointed out to him that he was being faced with a real challenge in taking over the duties at Richmond because the office at Richmond was in a most unsatisfactory condition. The Director told him that its physical condition was bad; its delinquency high; there were a number of Agents who had not yet qualified for testifying in Federal Court; the time spent in headquarters by Agents was excessive; the statistical record was very poor; that there were a number of bank robberies in the area of Alexandria, Virginia, which had not been solved; and that informant coverage, particularly in the Alexandria area, in the criminal field was grossly inadequate. The Director also called to this Agent's attention the need for his giving his personal attention to the placement of any names upon the Security Index for pick up. The Director discussed with him general informant operations and the need for greater scrutiny in screening informants.

On 3-2-55 he was transferred to the Richmond Office as SAC, with the same grade and salary minus the 25% cost-of-living allowance.

On 3-13-55 he received a basic salary increase to \$11,610 per annum in GS-15. On 3-31-55 Mr. Mohr rated him SATISFACTORY.

His daily average overtime for March, 1955 was 5 hours 59 minutes.

During a ^{recheck} inspection of the Richmond Office in March, 1955, Inspector Nugent advised that he had been SAC at Richmond since 3-2-55. The Inspector stated that it was too soon to determine whether he would be able to successfully operate an office having as large a complement of personnel as Richmond had. He had certainly taken hold in good fashion and it was believed he would do a good job. The Inspector advised there was no reason to recommend any change in his present assignment. The various functions of the office were rated as follows:

PHYSICAL CONDITION AND MAINTENANCE	EXCELLENT
INVESTIGATIVE MATTERS	VERY GOOD
ADMINISTRATIVE OPERATIONS	GOOD
PERSONNEL MATTERS	VERY GOOD
CONTACTS	EXCELLENT

By letter dated 4-11-55 he was advised that the findings reported by Inspector Nugent as a result of his recheck inspection of the Richmond Office indicated favorable progress in correcting the weaknesses found in December, 1954, inspection. He was advised, among other things, that he take vigorous and prompt action to reduce the high delinquency in security work. The Inspector found errors of form in pending files to be 14.12 per cent. This was too high and must be reduced. He should see to it that contacts were promptly made with security and criminal informants at the required intervals. Develop additional and better

security informants so that missing Smith Act subject [redacted] could be located and so that he would be fully informed at all times regarding activities or proposed activities of those whose actions were inimical to the best interests of the United States. He should put particular stress on the development of informants in the field of bank robbery. His office had several unsolved bank robberies in the Alexandria district. Average time in the office for February was too high. His statistical accomplishments were unsatisfactory in all fields except automobiles recovered. In regard to the decline in fugitives apprehended, he should be sure that full credit was taken for all fugitive apprehensions within existing regulations. He should see that fugitive form letters were filed promptly in all instances where warranted. He should improve the quality of investigations being made to locate fugitives. He should be alert to obtain Unlawful Flight cases as a means of increasing FBI fugitive apprehensions. b6

By letter dated 4-14-55 he was CENSURED relative to the handling by the Richmond Office of the investigation of the alleged kidnaping of [redacted] [redacted] Because of his failure to see to it that all Resident Agents of the Richmond Division had been apprised of the bank robbery of the Bank of Virginia, McGuire Facility, Veterans Administration Hospital, at Richmond on 3-25-55, and the fact that [redacted] was a fugitive being sought in the investigation of this bank robbery the agents handling the alleged kidnaping of [redacted] were not aware of his status as a fugitive. Had he appropriately advised these agents of this data [redacted] could have been promptly apprehended at the time he was interviewed as an alleged kidnaping victim. b6

By letter dated 4-28-55 he was CENSURED inasmuch as he approved an airtel dated 3-31-55, in an Internal Security case involving [redacted] without noting that this communication contained a serious error in the form of an erroneous date. b6

His daily average overtime for April, 1955, was 3 hours 53 minutes.

His daily average overtime for May, 1955, was 3 hours 34 minutes.

By letter dated 6-13-55 he was COMMENDED inasmuch as no letters of censure were directed to Special Agent personnel assigned to his office based on errors in correspondence emanating from the Richmond Office in May, 1955.

His daily average overtime for June, 1955, was 3 hours 35 minutes, and July, 1955, was 3 hours 19 minutes.

By letter dated 8-4-55 he was COMMENDED for his alertness in closely following the work of his division and keeping the Bureau fully informed of the fact that four Special Agents could be spared for transfer to other divisions where their services were urgently needed in view of the drop in the case load of his office. He was advised that by separate communications four Special Agents were being transferred to other divisions.

His daily average overtime for August, 1955, was 3 hours 23 minutes.

By letter dated 9-7-55 he was CENSURED in view of the transfer performance rating submitted by him on Special Agent Ernest J. Dabinett, Jr., on 8-19-55 which reflected numerous deficiencies in his work although he (SAC) rated him satisfactory on all items of his performance on the rating guide and check list of the report. It was noted SAC Gale commented in this report that he had experienced difficulty in grasping the objective of an investigation, he had made an above-average number of administrative and procedural errors, needed to improve his over-all knowledge of basic policies and investigative techniques, and that it had been necessary to afford him close supervision to insure the proper handling of his work. Those comments certainly appeared inconsistent with satisfactory ratings on such elements as initiative, planning ability, knowledge of duties and investigative ability. Furthermore, he had not previously advised the Bureau of deficiencies in this agent's performance in order that appropriate action could be taken. Prompt notification of those weaknesses would have precluded this agent's recent transfer to the New York Division since this transfer was made from the Office of Preference list.

By letter dated 9-12-55 APPRECIATION was expressed to him for the vigorous action he took to refute certain charges made against the Bureau during a panel forum held in connection with the annual conferences of the Virginia Sheriffs and City Sergeants Association and Commonwealth Attorneys for the State of Virginia. It was particularly gratifying to note that there was no hesitancy on his part to set the record straight regarding the activities and jurisdiction of the Bureau in certain investigative matters.

His daily average overtime for September, 1955, was 3 hours 25 minutes, and October, 1955, was 3 hours 07 minutes.

By letter dated 11-4-55 he was COMMENDED for his exemplary services in the success achieved relative to the investigation of a Bribery case and the apprehension of one of the subjects, [REDACTED] b6

His daily average overtime for November, 1955, was 3 hours 11 minutes.

By letter dated 12-1-55 he was COMMENDED for his splendid leadership which enabled the Richmond Office to exceed its quota for the 1955-56 FBI Employees Consolidated Charity Fund campaign. He was advised that the Director was pleased to observe that his office enjoyed 100% participation among the employees who were included in the campaign, and he was instructed to express the Director's hearty congratulations to the members of the Working Committee of the fund, as well as every keyman, whose enthusiastic efforts made this magnificent record possible.

Routing Slip dated 12-1-55 reflected that SAC Gale requested annual leave commencing 12-27-55 and extending through 1-13-56. This request was approved.

By memorandum dated 12-6-55 reference was made to his memorandum of 11-30-55 submitting amended pages to the war plans of his office and explanations for having failed to submit appropriate amended pages to his war plans by 11-21-55, and he was advised that his failure to comply with Bureau instructions in this important matter dealing with the emergency relocation of the Attorney General was a reflection upon the administration of his office. If the Agent who normally handled administrative details relative to the war plans in his office was so heavily assigned with expedite matters that he could not attend to his responsibilities in connection with war plans it was apparent that there should be an alternate Agent who was capable of carrying on administrative responsibilities in connection with his war plans. It was obvious that he failed to exercise good judgment in this instance.

Effective 1-15-56 he received a Uniform Promotion to \$11,880 per annum in Grade GS-15.

His daily average overtime for December, 1955 was 2 hours 22 minutes.

His daily average overtime for January, 1956, was 3 hours 41 minutes.

By letter dated 2-16-56 he was COMMENDED and through him the agents who contributed materially to the splendid results attained in obtaining clerical employees for the Seat of Government during the months of December and January, were commended.

On 2-26-56 he was transferred to the Cincinnati Office as Special Agent in Charge.

His daily average overtime for February, 1956, was 3 hours 3 minutes.

By letter dated 3-9-56 to the Director, W. E. Traylor, Chief of Police, Petersburg, Virginia, expressed his regrets at the transfer of this SAC from the Richmond Office. Mr. Traylor advised while he was in Richmond, Mr. Traylor always received full cooperation from his office as well as from other agents with whom Mr. Traylor had contacts at different times. This letter was acknowledged on 3-15-56.

The Director saw him on 3-19-56, and said he made a very good personal appearance and seemed to be enthusiastic about his new duties as Special Agent in Charge at Cincinnati to which he was transferred from the Richmond Field Division. Mr. Gale stated that he did not find the Cincinnati Office in satisfactory condition and he was endeavoring to take prompt and vigorous steps to bring it up to Bureau standards. The Director told him that the Director had likewise been dissatisfied with the operations of the Cincinnati Office and the Director noted it had dropped in all its accomplishments from the previous fiscal year; that an excessive number of letters of censure had been addressed to it; and that the last inspection of the Cincinnati Office indicated it was, at best, only in fair condition. The Director told SAC Gale that he (the Director) wanted him to tighten up the administration of that office, to see that it was more productive in accomplishments and to insure that the quality of the work was improved, as the Director had indicated that there had been numerous inaccuracies in reports, lack of thoroughness in reports and lack of completeness in reports.

On 3-31-56 Mr. Mohr rated him SATISFACTORY.

His daily average overtime for March, 1956, was 3 hours 26 minutes, and April, 1956, was 3 hours 06 minutes.

By letter dated 5-9-56 he and the personnel of his office were COMMENDED inasmuch as no case delinquency was reported for the month ending 4-30-56.

By letter dated 5-21-56 he was COMMENDED for his most efficient services relative to the apprehension of I. O. Fugitive Calhoun Leadbetter, subject of an Unlawful Flight to Avoid Prosecution-Murder case.

His daily average overtime for May, 1956, was 3 hours 13 minutes, and June was 4 hours 23 minutes.

By memorandum dated 7-17-56 Mr. Boardman advised that he had occasion to visit with Hugh K. Martin, U. S. Attorney, Columbus, Ohio, who the Director would recall was contacted by SAC Gale at the Director's specific instruction shortly prior to the commencement of the U. S. Attorneys' Conference. Mr. Martin indicated that he had had a most interesting discussion with SAC Gale, which he stated was of about three hours' duration. Martin commented that he was very favorably impressed with SAC Gale, and considered Gale to be a very sharp, intelligent and enthusiastic young man. He commented that he

gained an excellent understanding of Bureau activities during this conversation.

His daily average overtime for July, 1956, was 3 hours 27 minutes.

By letter dated 8-16-56 he was ordered under transfer to the Training and Inspection Division.

His daily average overtime for August, 1956, was 3 hours 05 minutes.

On 9-16-56 he reported to the Training and Inspection Division.

His daily average overtime for September, 1956, was 2 hours 54 minutes.

On 10-10-56 Inspector J. E. Edwards advised he assisted during the recheck inspection of the Milwaukee Division from 10-4 through 10-8-56. He served as #1 Man and assisted in organizing the inspection work; he assisted in making assignments; he assisted in counselling and instructing the Aides, and assisted in correlating and supervising their work and activity. He personally handled a check of the Chief Clerk's Office and performed other duties as assigned. He made very searching and detailed inquiries, he displayed an excellent knowledge of the investigative and administrative operations of an office and a very good understanding of Bureau policies and procedures. He displayed alertness, initiative, and resourcefulness, he was clear and accurate in his paper work, and he manifested sound, logical and practical judgment. He accepted and carried out his responsibilities aggressively and forcefully, and he properly and expeditiously handled a considerable volume of work. He was considered well qualified and particularly capable of properly carrying out inspection assignments on his own.

His daily average overtime for October, 1956, was 3 hours 22 minutes.

By memorandum dated 11-20-56 Mr. Teague advised he assisted him on two inspections - Dallas and Oklahoma City, and SA Gale was left in charge of the Oklahoma City inspection for about five days. He was a hard worker, he was enthusiastic and made a very clean-cut appearance, and he was forthright in his approach. He appeared to have a tendency to arrive at decisions without fully weighing all facts, thus he had a need to become more steady. This was brought to his attention and his final judgment on a situation seemed satisfactory. (As an example of these observations Mr. Teague stated that during the Dallas inspection, when checking organization of a territory as to a resident agency, SA Gale's first decision was to change the residency, but when all facts and circumstances were available he concluded the existing situation was satisfactory.) He lacked background as a Bureau supervisor and thus he was not fully familiar with SOG procedures. He was intelligent, he knew field procedures and organizations, and he appeared to know what was important to field office functions.

His daily average overtime for November, 1956, was 3 hours 9 minutes; for December, 3 hours 4 minutes.

On 1-4-57 Mr. Whelan rated him SATISFACTORY and said he had shown himself to be a hard worker who was intelligent and who knew field office procedures and organizations and appeared to know what was important to field office functions. He had been the Inspector in Charge of the inspection of the Knoxville and Little Rock Offices. His write-ups appeared to be clear and concise and his appraisals were conservative and accurate. He would carry his enthusiasm into the inspection work, he had shown a capacity to work hard and to question and inquire into procedures. His broad experience in the Bureau should equip him to be steady and arrive at the correct conclusions. It was believed he was progressing in his present assignment, he was interested in and available for any and all assignments.

His daily average overtime for January, 1957, was 2 hours 29 minutes; for February, 2 hours 15 minutes.

On 3-31-57 Mr. Whelan rated him EXCELLENT and said he had assisted on four inspections and had conducted four, he was a hard worker and knew how to probe for weaknesses, and he had an excellent knowledge of field office administration and investigative operations. He had exercised satisfactory judgment and discretion. He was interested in advancing and it was believed he was progressing well in his present assignment. He was interested in, available for, and suitable for administrative advancement.

In a separate memorandum from Mr. Tamm to Mr. Tolson it was recommended he be designated as an Inspector.

His daily average overtime for March was 3 hours 19 minutes.

On 4-7-57 he was designated as an Inspector in the Training and Inspection Division.

His daily average overtime for April was 2 hours 42 minutes; May, 2 hours 04 minutes; and June, 2 hours 32 minutes.

On 7-14-57 he received a Uniform Promotion to \$12,150 per annum in GS-15.

His daily average overtime for July was 4 hours 05 minutes.

He attended Criminal In-Service Training from 8/5-16/57.

His daily average overtime for August was 2 hours 06 minutes; September, 5 hours 49 minutes; October, 2 hours 38 minutes; November, 5 hours 11 minutes; and December, 3 hours 32 minutes.

On 1-12-58 he received a Basic Increase to \$13,370 per annum in GS-15.

His daily average overtime for January, 1958, was 4 hours 39 minutes.

On 2-19-58 he was COMMEDED for his highly exemplary attitude in reporting to work on 2-18-58 notwithstanding extremely hazardous travel conditions.

His daily average overtime for February was 2 hours 05 minutes.

On 3-31-58 Mr. Malone rated him EXCELLENT and said he was extremely sincere and conscientious in the handling of his assignments as Inspector. He was very thorough and careful in analyzing the problems of the field offices he inspected. He had a complete understanding of inspection policies and procedures. He was interested in, available for, and well qualified for administrative advancement. He was available for general and special assignment.

His daily average overtime for March was 3 hours 45 minutes; April, 3 hours 24 minutes; and June, 3 hours 42 minutes. His daily average overtime for May, 1958, 3 hours 24 minutes.

By letter dated 6-19-58 he was COMMEDED for his excellent participation in the apprehension of I. O. Fugitive [redacted] subject of an Unlawful Flight to Avoid Prosecution-Murder case. ^{b6}

His daily average overtime for July, 1958, 4 hours 2 minutes.

By letter dated 9-5-58 he was COMMEDED for the excellent manner in which he had been discharging his inspection assignments. He was particularly commended for the outstanding inspections he conducted of the Cleveland and Oklahoma City Offices. In this connection Mr. Tolson recommended that he be promoted to GS-16.

By letter dated 9-5-58 he was promoted to the position of Inspector, \$14,190 per annum in GS-16, effective 9-7-58.

On 9-9-58 the Director saw Inspector Gale when he called to express his appreciation for his promotion to full Inspector in GS-16. The Director noted he made an excellent personal appearance, seemed to be enthusiastic and interested in his work and the Director would rate him above average.

His daily average overtime for August, 1958, 5 hours 56 minutes; September, 2 hours 33 minutes; October, 4 hours 45 minutes; November, 3 hours 27 minutes; December, 2 hours 50 minutes; January, 1959, 5 hours 10 minutes; February, 2 hours 41 minutes; March, 2 hours 7 minutes.

On 4-16-59 he was ordered under transfer to the Washington Field Office as SAC. By letter dated 4-20-59 Mr. Gale expressed his appreciation for the confidence the Director had placed in him.

On 3-31-59 Inspector Malone rated him EXCELLENT and said he demonstrated the ability to handle the most complicated investigative matters. He was extremely sincere and conscientious in his approach to his assignments as an Inspector. He was thorough and searching in his analyses, displayed excellent judgment in bringing matters to a logical conclusion, and had the ability to concisely, clearly and accurately set forth the results of his work. He had a complete understanding of inspection policies and procedures. He was quick to detect any situation which might reflect unfavorably on the Bureau and was honest and forthright in discussing inspection findings with the responsible personnel. He had been hardhitting, penetrative, and aggressive in pinning down personnel problems, discovering existing weaknesses and fixing responsibility for derelictions on the part of employees. He exhibited a desire and capacity to do the best possible job at all times. His work as an Inspector had been far above average. He had no opportunity to participate in the informant program, however, he had excellent appreciation of the value of this program as evidenced by emphasis he had placed thereon during inspection assignments. He was interested in, available for and considered completely qualified for administrative advancement. It was felt that he had demonstrated definite qualities of leadership and had above-average capabilities to qualify him for further administrative advancement.

During the Inspection of the Training and Inspection Division during March, 1959, Inspector Tavel said Mr. Gale had a pleasant personality but was obviously a firm administrator, and the inspections which he had conducted reflected that he was thorough, probing, and penetrative in his inquiries. He did not hesitate to recommend disciplinary action when necessary and was a real driver. He was intelligent, alert, and decisive in his thinking. He made an excellent Inspector and had the capacity to handle any administrative position. Inspector Tavel recommended that he be considered for positions of greater administrative responsibility.

On 4-27-59 the Director saw Inspector Gale and said he made an excellent personal appearance, seemed to be extremely enthusiastic about his new assignment, and the Director would rate him above average. The Director told Mr. Gale he was embarking upon a real challenge in that the Washington Field Division had never been operated entirely to his satisfaction. The Director stated by reason of having no road work, it was really the privileged office of assignment for Agents who were married, but the Director felt that the Washington Field Office had not been producing as it should and there was not the energy nor the morale which should be prevalent in such an important field office. The Director cited to Mr. Gale the fact that the Bureau had had a number of personnel problems in the Washington Field Office together with the writing of letters by personnel of that office to the Washington Post critical of the policies of the Bureau. There did not seem to have been the proper supervision nor indoctrination of personnel, and this was his first task. The Director spoke to Mr. Gale about the delinquency in the Washington Field Division. The Director told Mr. Gale that he was also particularly concerned about the fact the Washington Field Division for the

first nine months of the current fiscal year when compared with the same period of the previous fiscal year had dropped 53% in fines, savings, and recoveries and this was a problem to which he should give his immediate attention. The Director told Mr. Gale that the Director noted from the last inspection that the stenographic production had been low in the Washington Field Division and that but recently the Bureau had had some personnel problems in that there was an excessive turnover of stenographers in the Washington Field Division, and the Director believed the Chief Stenographer, while competent, had not been able to spark the personnel under her supervision to enthusiastic production and attitude. There had been 29 letters of censure written to the personnel of the Washington Field Division during the last six months and this was, of course, excessive. The Director told Mr. Gale that the Director was particularly concerned about the failure of the Washington Field Division to solve the Government Services, Inc., robbery which occurred in May, 1957; the murder of one Johnson, which occurred in June, 1953; and the robbery of the Potomac Federal Savings and Loan Association, which occurred in August, 1958. The Director pointed out to Mr. Gale that while the Bureau's relations with the District of Columbia Police Department were cordial, the Director wanted Mr. Gale to be thoroughly aware of the fact that the Chief of Police had in the past given the Bureau a great deal of "double talk." The Director also alerted Mr. Gale to some of the personal misconduct which had been indulged in by the Chief of Police.

His daily average overtime for April was 3 hours 10 minutes.

On 5-11-59 he was transferred to the Washington Field Office as SAC.

His daily average overtime for May was 3 hours.

By letter dated 6-17-59 he was COMMEDED and through him, the agents of the Washington Field Office for the splendid manner in which they participated in the handling of a matter of great interest to the Bureau in the security field.

His daily average overtime for June was 3 hours 6 minutes.

On 7-15-59 the Director saw him and was briefed on "Operation Top Flite". He left the Director a compilation of exhibits showing the layout and the approach which was to be made to the same. The Director discussed with him the over-all importance of that operation and commended him for the manner in which it had been handled up to the present time.

His daily average overtime for July, 1959, was 3 hours 52 minutes and for August, 1959, was 3 hours 6 minutes.

By letter dated 8-7-59 the Washington Field Office was COMMEDED for the splendid statistical accomplishments they attained for the fiscal year 1959.

By letter dated 8-7-59 he received a CASH AWARD of \$200. for his excellent on-the-spot supervision of an operation in the security field of vital importance to our country.

By letter dated 8-7-59 SAC Gale and Agents of the Washington Field Office were COMMEDED for their outstanding performance in connection with an operation in the security field of vital significance to the country.

In a letter to SAC Gale dated 9-8-59 Agents of the Washington Field Office were COMMEDED for the excellent investigation conducted of the Kidnaping case involving [redacted] b6

By letter dated 9-10-59 Agents of the Washington Field Office were COMMEDED for their participation in the investigation of the Bank Robbery case involving [redacted] and others.

His daily average overtime for September, 1959, was 3 hours 14 minutes.

By letter dated 10-1-59 SAC Gale and Agents of the Washington Field Office were COMMEDED for their competent participation in a matter of a highly confidential nature of great importance to the Bureau in the security field.

By letter dated 10-6-59 Agents of the Washington Field Office were COMMEDED for their excellent work in the supervision and investigation of the White Slave Traffic Act case involving [redacted] b6

By letter dated 10-16-59 SAC Gale and Washington Field Office Agents were COMMEDED for their outstanding services in connection with the Bank Robbery case involving [redacted] and others.

His daily average overtime for October, 1959, 3 hours 24 minutes.

On 11-4-59 the Director saw him when he called to make a status report upon the progress of the work in his office. The Director stated he made an excellent personal appearance, seemed to be intensely interested in his work, and the Director would rate him above average. The Director discussed with him the fact there had been a substantial drop of 64% in fines, savings, and recoveries for the first three months of the current fiscal year; the necessity of developing sources of information and informants both in the criminal and security fields; the fact there had been fifteen letters of censure written to employees of the Washington Field Division during the last six months; and that he should give the work of [redacted] very close attention. During the con-

versation the Director COMMENDED him for the excellent work which his office did recently through the use of an informant in solving a Maryland bank robbery case.

His daily average overtime for November, 1959, was 3 hours 17 minutes.

By letter dated 12-14-59 he was CENSURED inasmuch as an inspection of the Chicago Office disclosed premature destruction in the Chicago Office of certain records relating to the attendance of officials of that office and although he discovered this situation during the 1958 Chicago Inspection he did not take effective steps to correct it.

By letter dated 12-15-59 he was COMMENDED and through him, the agents in the Washington Field Office who participated in a delicate undertaking of a highly confidential nature of interest to the Bureau in the Security Field.

During an inspection of the Washington Field Office which was concluded in December, 1959, Inspector Desmond stated he had an excellent appearance and an extremely friendly, vivacious personality. He had an energetic, enthusiastic approach to his work and had a firm grasp on all phases of operations in his office. He was demanding of the personnel but not unreasonably so. He had been on his present assignment less than eight months and it was believed that he should be continued on this assignment for further experience and evaluation before being considered for advancement. The evaluations of the various functions of the Office are as follows:

PHYSICAL CONDITION AND MAINTENANCE	GOOD
INVESTIGATIVE OPERATIONS	VERY GOOD
ADMINISTRATIVE OPERATIONS	GOOD
PERSONNEL MATTERS	FAIR ✓
CONTACTS	VERY GOOD

In connection with the FAIR RATING given to PERSONNEL MATTERS it was reflected that the overtime of agents found to be equitably shared and productive with three exceptions: namely, SAs Edward J. Armbruster,

For six months, June through November, 1959, their overtime averaged 94 minutes; 93 minutes; and 109 minutes, respectively, per day as compared with the office average of 144 minutes for the same period. was on limited duty due to heart condition. All three agents stated their work assignments did not require any additional overtime. All performed more than minimum amount of overtime required by Fringe Benefits Law. The SAC was instructed to insure that all agents have adequate assignments for equitable sharing of the work load. Morale was very good. Personnel

b6

considered adequate and not excessive. High turnover rate of stenographers early in 1959 had declined in October and November. Morale of stenographers had improved and was now rated as good. The over-all rating of FAIR was given because of above instances where overtime work not equitably shared.

His daily average overtime for December, 1959, was 3 hours 30 minutes.

By letter dated 1-4-60 SAC Gale was advised of the findings of the Inspection recently conducted of the Washington Field Office. He was instructed to carefully review the findings and to correct all delinquencies and to advise the Bureau when the delinquencies were corrected.

By letter dated 1-12-60 the personnel of the Washington Field Office were COMMENDED through him for their capable performance in connection with the investigation to locate [redacted] subject of an Unlawful Flight to Avoid Prosecution-Murder case. b6

By letter dated 1-14-60 the agents of the office were COMMENDED for their participation in the investigation of the Unlawful Flight to Avoid Prosecution-Kidnaping case involving [redacted]

On 1-20-60 he saw the Director and he stated Mr. Gale made an excellent personal appearance, seemed to be intensely interested in his assignment, and he would rate him above average. The Director brought to his attention the progress which had been made in the Washington Field Division since he last saw him in November, 1959. He discussed with Mr. Gale the operations of the Washington Field Division.

By letter dated 1-29-60 he was COMMENDED for the excellent manner in which he represented the Bureau at the Optimist Club luncheon on 1-27-60.

His daily average overtime for January, 1960, 3 hours 9 minutes; February, 1960, 3 hours 1 minute.

By letter dated 3-3-60 Mr. Gale and personnel of the Washington Field Office were COMMENDED for the outstanding attitude displayed in reporting for duty 3-3-60 despite the extremely adverse weather conditions.

By letter dated 3-4-60 personnel of the office were COMMENDED through him inasmuch as the reports of automobile accidents submitted by all field offices for the calendar year 1959 had been reviewed and disclosed that the Washington Field Office had a substantial reduction of accidents in 1959 over 1958. It was noted that since 1957 they had effected a reduction of 53 per cent in the number of accidents.

On 3-6-60, he received a Uniform Promotion to \$14,430 per annum in Grade GS-16.

By letter dated 3-8-60, the agents of the Washington Field Office were COMMEDED through him for their part in the contact of a highly confidential source of information of considerable interest to the Bureau in the security field.

By letter dated 3-31-60, the personnel of the Washington Field Office who participated so ably in the investigation of the Unlawful Flight to Avoid Prosecution-Murder case involving [redacted] were COMMEDED.

b6

On 3-31-60, Mr. Mohr rated him EXCELLENT.

His daily average overtime for March, 1960, was 3 hours 14 minutes; April, 3 hours 1 minute.

On 5-9-60, the Director saw SAC Gale at which time he stated that SAC Gale made an excellent personal appearance and seemed to be intensely interested in his work. The Director called to his attention the fact that there were two classes of cases in the Washington Field Office which exceeded 10% in delinquency and should be corrected. SAC's attention was also called to the fact that the Director noted the Washington Field Office for the first ten months of the current fiscal year when compared with a similar period of the previous fiscal year was down 37% in fines, savings, and recoveries, and the Director hoped before the end of the fiscal year this downward trend could be corrected. It had been necessary during the last six months to address eleven letters of censure to the personnel of the Washington Field Office, which could have been prevented if each person had performed his individual responsibility. The matter of agents on limited duty was discussed with SAC and the Director outlined to him his views. SAC was commended by the Director on the fact that his office had solved all violations of the Federal Bank Robbery Statute in his office. The Director stressed to him the importance of continuing pressure in bringing about a solution of the murder of John Samuel Johnson and also the solution of the robbery of the Government Services, Inc., truck in 1957. Mr. Gale was cautioned about the care that must be taken in handling any matter with espionage in view of the delicacy of the international situation.

His daily average overtime for May, 1960, was 3 hours.

By letter dated 6-1-60, agents of the Washington Field Office were COMMEDED through SAC Gale for their capable performance in connection with the development and contact of a highly confidential source of information of much value to the Bureau in the security field.

On 6-7-60, he was promoted to \$15,375 per annum in Grade GS-17.

On 6-9-60, the Director saw him and stated he had called to express his appreciation for his reallocation to Grade GS-17. The Director stated that Mr. Gale made an excellent personal appearance, seemed to be intensely interested in his work and the Director rated him above average.

His daily average overtime for June, 1960, was 3 hours 11 minutes.

On 7-10-60, he received a Basic Increase to \$16,530 per annum in Grade GS-17.

By letter dated 7-11-60, the personnel of the Washington Field Office were COMMEDED through SAC Gale for the exceptionally fine work done in connection with the recruitment of Special Agent applicants for the July 11, 1960, class.

By letter dated 7-28-60, the agents of the Washington Field Office were COMMEDED through him for the capable manner in which the investigations of the Unlawful Flight to Avoid Prosecution-Rape case involving [redacted] and the Unlawful Flight to Avoid Confinement-Murder case involving [redacted]

b6

His daily average overtime for July, 1960, was 3 hours 7 minutes.

By letter dated 8-4-60, the agents of the Washington Field Office were COMMEDED for the very excellent services rendered in connection with the development and contact of a highly confidential source of information of great value to the Bureau in the security field.

By letter dated 8-11-60, he was COMMEDED for the excellent job he did in connection with a recent operation of vital interest in the security of the country.

By letter dated 8-15-60, he was COMMEDED and through him, the participating agents in the Washington Field Office were also COMMEDED for the splendid work done in the investigation and apprehension of [redacted] an Identification Order Fugitive and the subject of an Unlawful Flight to Avoid Prosecution-Murder case.

b6

His daily average overtime for August, 1960, was 3 hours 21 minutes.

By letter dated 9-6-60, agents of the Washington Field Office were COMMEDED through him for their capable performance in connection with the investigation of a matter of the utmost importance to the Bureau in the security field.

By letter dated 9-7-60, the agents of the Washington Field Office were COMMEDED for their fine work in the investigation of a certain

matter of grave concern to the security of our country.

By letter dated 9-12-60, SAC Gale, on behalf of the employees in the Washington Field Office, congratulated the Director on the enactment of legislation providing the Director with full salary upon retirement. By letter dated 9-13-60, the Director expressed his appreciation for SAC Gale's letter of 9-12-60.

By letter dated 9-26-60, the personnel of the Washington Field Office were COMMENDED through him for the handling of a matter of much interest to the Bureau in the security field.

His daily average overtime for September, 1960, was 3 hours 9 minutes.

By letter dated 10-11-60, he was COMMENDED for his services in connection with the 67th Annual Conference of the International Association of Chiefs of Police.

By letter dated 10-27-60, he was ordered under transfer to the Chicago Office as Special Agent in Charge.

His daily average overtime for October, 1960, 3 hours 16 minutes.

On 11-7-60 the Director saw him and generally discussed with him the conditions of the Chicago Office. Mr. Gale expressed appreciation to the Director for being assigned to Chicago as Agent in Charge.

By letter dated 11-18-60 he was advised he was being placed in the Bureau's Chain of Command in connection with defense plans.

On 11-20-60 he reported to the Chicago Office as Special Agent in Charge.

By letter dated 11-23-60 he was advised of the findings of the recheck inspection of the Chicago Office October 31 - November 10, 1960, conducted by Inspector Roy K. Moore. The various operations of the Chicago Office were rated as follows: Physical Condition and Maintenance and Contacts - Very Good; Administrative Operations and Personnel Matters - Good; and Investigative Operations - Fair. Among other things, he was advised that statistical accomplishments regarding convictions and fugitives apprehended for the first four months of fiscal year 1961 were below the figures for the same period in fiscal year 1960, and that it would be incumbent upon him to afford these matters his personal attention and close supervision in order to reverse this very undesirable trend. Missed deadlines in Security of Government Employees were still excessive and he should personally insure this important matter was handled. The Director was concerned over the excessive amount of time spent by personnel in the office.

His daily average overtime for November, 1960, 2 hours 36 minutes.

By letter dated 12-16-60 the agents of the Chicago Office were COMMENDED through him who performed in such a capable manner in connection with a confidential operation in the security field.

By letter dated 12-20-60 agents of the office were COMMENDED through him who took part so capably in the investigation of the Theft from Interstate Shipment case involving [redacted]

His daily average overtime for December, 1960, 3 hours 14 minutes.

By letter dated 1-5-61 agents of the office were COMMENDED through him who took part in the investigation of the Interstate Transportation of Stolen Property case involving [redacted] and others.

His daily average overtime for January, 1961, was 3 hours 10 minutes; February, 3 hours 36 minutes. b6

By letter dated 3-15-61, the Agents of the Chicago Office were COMMENDED through him for the excellent investigation of the Bank Robbery case involving [redacted] and others.

By letter dated 3-24-61, the Agents of the Chicago Office were COMMENDED through him for their participation in the investigations of two Bank Robbery cases involving [redacted]

On 3-31-61 Mr. Mohr rated him EXCELLENT.

His daily average overtime for March, 1961, 3 hours 6 minutes.

The Director saw him on 4-7-61 and discussed with him generally the program and the responsibilities which we must face up to in handling this crash action against racketeering individuals and groups in this country and in view of the fact Chicago was one of the largest areas and had in it a number of the top targets, it was imperative he give top priority to the handling of this class of work. The Director also told Mr. Gale of the Director's conference with Mr. James P. O'Brien, the new United States Attorney at Chicago, and the Director's impression was that Mr. O'Brien had a high regard for the FBI and wanted to work in close cooperation with it and he should establish close and cordial relations with Mr. O'Brien.

By letter dated 4-13-61 he was CENSURED inasmuch as he and his subordinates delayed in handling a Special Inquiry investigation. In connection with the above letter of censure he was instructed on 4-19-61 to conduct a thorough review of the handling of this matter and to secure explanations from responsible personnel and furnish same to the Bureau along with his

comments and recommendations concerning administrative action.

On 4-28-61 reference was made to the annual performance ratings submitted on SAs [redacted] Walter M. Higgs, Jr., and [redacted] wherein deficiencies were noted and indicated that sufficient thought was not being given to the handling of performance ratings. He was instructed to take the necessary steps to insure that in the future more care was given to their preparation and review.

His daily average overtime for April, 1961, 3 hours 10 minutes.

b6

On 5-2-61 reference was made to the annual performance rating of SA [redacted] which stated in item D1 that his sick leave record was not abnormal and in item D2 that he used more sick leave than he earned. An affirmative finding on either point required an explanation in the narrative comments. There was no mention of the matter, however, in the narrative comments. A revised page for the narrative comments should be submitted promptly, along with his explanation for failing to comment on his sick leave in the narrative comments.

By letter dated 5-18-61 he was instructed to secure necessary explanations from personnel responsible for the delay in submitting a report in the investigation concerning [redacted] Selective Service Act of 1948, his file 25-36693. Although this investigation was based on a Selective Service System Delinquent Registrant Report received from the U. S. Attorney on 11-30-60, no report was submitted until 5-4-61. He was also instructed to submit his recommendations for administrative action for the personnel responsible.

b6

By letter dated 5-23-61 personnel of the Chicago Division were COMMENDED through him for their competent assistance in the investigation of the Interstate Transportation of Stolen Property case involving [redacted] and others.

By letter dated 5-26-61 agents of the Chicago Office were COMMENDED through him for their capable performance in connection with an operation of much value to the FBI in the security field.

By letter dated 5-29-61 he was COMMENDED for his excellent performance in connection with the National Bankruptcy Act case involving Sterling Harris Ford, Inc., and others.

By letter dated 5-29-61 the Chicago Office was COMMENDED through him for the capable manner in which they performed in the investigation of two Espionage cases.

His daily average overtime for May, 1961, was 3 hours.

By letter dated 6-2-61, SAC Gale was instructed to discuss the matter of low overtime performance of SA [redacted] with him, ascertain his future intentions and furnish the results of the discussion to the Bureau together with his comments and recommendation. He was also instructed to advise why he failed to detect this situation and initiate appropriate corrective action. b6

By memorandum dated 6-15-61, he was considered and passed over for promotion to Grade GS-18 inasmuch as it was felt that the Chicago Office did not appear to justify a grade GS-18 Special Agent in Charge. The Director agreed to this.

By letter dated 6-19-61, he was advised that although the 19.9% Time Spent in Office (TIO) by agents of the Chicago Office for the month of May was a reduction from the figure of 22.6% for April, it was still considered excessive. The Director instructed that further reduction be achieved.

His daily average overtime for June, 1961, was 3 hours 1 minute.

He attended Security In-Service School from 7-5-61 to 7-14-61.

While attending In-Service from 7-5-61 to 7-14-61, the Director saw him on 7-6-61, and stated he made an excellent personal appearance, seemed to be intensely enthusiastic about his assignment at Chicago, and rated him considerably above average. He had been in charge of the Chicago Office since last November and seemed to have an excellent grasp of the various problems in that office. The Director discussed with him various functions in the Chicago Office in which an improvement was desired. The Director personally presented him with his Twenty-Year Service Award Key and Congratulatory Letter during his In-Service in recognition of his TWENTIETH ANNIVERSARY on 7-19-61.

By letter dated 7-14-61, his attention was called to the fact that at the conclusion of the last fiscal year the Chicago Office was 25% down in convictions. He was advised that immediate steps should be taken to detect the weaknesses which existed to cause this situation.

By letter dated 7-17-61, he expressed appreciation to the Director for personally presenting him with his Twenty-Year Key while he was attending In-Service and for the autographed photograph of the occasion.

By letter dated 7-20-61, Agents of the Chicago Office were COMMENDED, through him, for bringing about the solution of an Interstate Transportation of Stolen Motor Vehicle case involving [redacted] and others and the apprehensions of [redacted] and [redacted] subjects of Unlawful Flight to Avoid Prosecution-Burglary cases. b6

By letter dated 7-21-61, he was advised that Time Spent In Office (TIO) by agents of the Chicago Office showed a downward trend over a three-month period, April - June, 1961, which was most favorable; however, TIO was still considered to be excessive. He was instructed to achieve a further reduction.

His daily average overtime for July, 1961, was 2 hours 55 minutes.

By letter dated 8-17-61, he was COMMENDED for his excellent on-the-spot direction of the apprehension of Robert William Schuette, a Top Ten Fugitive and the subject of an Unlawful Flight to Avoid Confinement-Robbery case.

By letter dated 8-21-61, he was advised that Bureau records disclosed that Time Spent In Office (TIO) by agents of the Chicago Office showed a decrease over a three-month period, May - July, 1961, which was a very favorable trend; however, TIO of the Chicago Office was still considered excessive. He was instructed to take whatever steps necessary to continue this reduction.

By letter dated 8-25-61, he was COMMENDED for his splendid on-the-scene direction of the apprehension of [redacted] subject of a Bank Robbery case and, through him, those agents who ably participated in this matter. b6

His daily average overtime for August, 1961, was 3 hours 21 minutes.

By letter dated 9-11-61, Agents of the Chicago Office were COMMENDED, through him, for their splendid assistance rendered in connection with the identification of the victims of the crash of a Trans World Airlines plane on 9-1-61, at Clarendon Hills, Illinois.

His daily average overtime for September, 1961, was 3 hours 16 minutes.

By letter dated 10-16-61, he was advised that Bureau records/that reflected while Time Spent in Office by Agents of the Chicago Office showed a decrease over a three-month period, June - August, 1961, it showed an increase during the month of September, 1961. He was instructed to give this matter his personal attention and take necessary steps to bring about reduction and reverse this unfavorable increase.

By letter dated 10-30-61, he was COMMENDED for the excellent manner in which he handled the contact with the "Chicago's American."

His daily average overtime for October, 1961, was 3 hours 8 minutes.

By letter dated 11-16-61, Agents of the Chicago Office were COMMENDED, through him, for their participation in the development of a highly confidential source of information of great value to the Bureau in the criminal field. (RE: CG 6486-C*)

His daily average overtime for November, 1961, was 3 hours 36 minutes.

On 12-10-61, he received a Uniform Promotion to \$16,790 per annum in Grade GS-17.

By letter dated 12-19-61, he was COMMENDED for his excellent supervision of the investigation of the Interstate Transportation of Stolen Property case involving the theft of medium transformer plans from the General Electric Corporation.

His daily average overtime for December, 1961, was 3 hours; January, 1962, 3' 23".

By letter dated 1-3-62, the Agents of the Chicago Office were COMMENDED, through him, for their assistance in the investigation of the Theft from Interstate Shipment case involving [redacted] and others.

By letter dated 1-8-62, the Agents of the Chicago Office were COMMENDED, through him, for their participation in the apprehension of [redacted] one of the subjects of a Bank Robbery case. b6

By letter dated 1-16-62 he was COMMENDED and through him the Chicago Office for exceeding their quota in the number of agents obtained for the New Agents' Classes which convened during the period June through October, 1961.

On 1-16-62 the Director saw him, while he was in town to attend conferences in the Department concerning the organized crime matters in his field division. Among other things, the Director discussed with him the pressing problems in the Chicago Office both in the organized crime field and in the coverage of subversive activities. The Director discussed the overtime of his office and that it was only to be performed when absolutely necessary in order to handle the requirements of our work. The Director mentioned the 12 violations of the Federal Bank Robbery Statute which were unsolved and this was most undesirable. He left two binders, one containing photographs which were given to each of the persons

attending the 22nd Congress of the Communist Party of the Soviet Union in Moscow last October and the other containing photographs obtained by the Chicago Office of certain areas where some of the top hoodlums make contact and in which we have technical coverage.

By letter dated 1-17-62 he was COMMEDED for the splendid manner in which he participated in the conferences on criminal intelligence matters held in Washington, D. C.

By letter dated 1-18-62 he was COMMEDED for his outstanding supervision in connection with the solution of the murder of John A. Kilpatrick, President of International United Industrial Workers of America.

By letter dated 1-18-62 the Chicago Office was COMMEDED through him for the participation in the solution of the murder of John A. Kilpatrick, President of International United Industrial Workers of America.

By letter dated 1-19-62 he was advised that Bureau records disclose the Time Spent in Office by Agents of the Chicago Office was increasing and this steady upward for the past three months was most undesirable.

By letter dated 1-23-62 he was COMMEDED and through him the agents of the Office who performed in such an exemplary fashion in the investigation of the Interstate Transportation of Stolen Motor Vehicle case involving

[redacted] His daily average overtime for March, 1962, was 4' 9" b6

DURING AN INSPECTION OF THE CHICAGO OFFICE DURING FEBRUARY, 1962, Mr. J. T. Haverty advised that he presented an excellent appearance, possessed pleasing personality, was conscientious, knowledgeable in Bureau procedures, an effective administrator and handled personnel firmly. The various functions of the office were rated as follows: (subject to final approval)

PHYSICAL CONDITION AND MAINTENANCE	....	VERY GOOD
INVESTIGATIVE OPERATIONS	.....	VERY GOOD
ADMINISTRATIVE OPERATIONS	.....	GOOD
PERSONNEL MATTERS	.....	GOOD
CONTACTS	.....	VERY GOOD

A letter dated 3-8-62 ^{was} ~~is being~~ directed to him advising him of the results of the recent inspection of the Chicago Office. Among other things, the space occupied by the Office was found to be well organized, adequate and satisfactorily maintained. He must endeavor through training and close supervision to eliminate substantive and form errors. Agents' time in office had been substantially reduced since the last inspection. An Agent in his office failed the Inspector's examination.

By letter dated 3-23-62, the Agents of the Chicago Office were COMMEDED through him for their capable participation in the investigation of the Theft from Interstate Shipment case involving [redacted] and others.

b6

On 3-31-62, Mr. Mohr rated him OUTSTANDING.

His daily average overtime for March, 1962, was 3 hours 20 minutes.

By letter dated 4-25-62, he was given an INCENTIVE AWARD in the amount of \$400.00 in recognition of his services from 4-1-61, to 3-31-62, which merited an outstanding performance rating for him. He subsequently expressed appreciation for this award.

His daily average overtime for April, 1962, was 2 hours 59 minutes.

By letter dated 5-15-62, Agents of the Chicago Office were COMMEDED through him for their excellent participation in the apprehensions of [redacted] three subjects of two Bank Robbery cases.

b6

By letter dated 5-17-62, he was advised that Bureau records disclosed that Time Spent in Office by Agents of the Chicago Office showed an increase in April over the preceding month of March. He was instructed to follow this matter closely.

By letter dated 5-24-62, he was COMMEDED, and through him, the personnel of the Chicago Office, for their participation in the investigation and apprehension of [redacted] subject of an Unlawful Flight to Avoid Prosecution-Murder case.

By letter dated 5-25-62, Agents of the Chicago Office were COMMEDED through him for their participation in the investigation and apprehension of [redacted] and others, subjects of a Theft from Interstate Shipment case.

b6

By letter dated 5-25-62 he was COMMEDED for the splendid manner in which he handled a situation wherein news media had obtained erroneous information relative to the apprehensions of [redacted] and [redacted] two of the subjects of an Unlawful Flight to Avoid Prosecution-Murder case.

His daily average overtime for May, 1962, was 3 hours 6 minutes; June, 3 hours 7 minutes.

By letter dated 6-15-62, he was advised that Bureau records disclosed that Time Spent in Office for May showed a decrease over the preceding month which was a favorable trend. He was advised to give attention to insure that all Time Spent in Office was necessary.

By letter dated 7-9-62, the Agents of the Chicago Office were COMMEDED through him for their participation in the investigation of the Bank Robbery case involving [redacted]

b6

By letter dated 7-31-62, SAC Gale was advised that at the end of the 1962 fiscal year the Chicago Office showed an increase in fugitive apprehensions and automobile recoveries, but a downward trend in convictions and fines, savings and recoveries. He was instructed to critically review the accomplishment record to determine weaknesses present and take every logical step to insure that the record of accomplishments for the current fiscal year would be a favorable one in all categories.

His daily average overtime for July, 1962, was 3 hours.

By letter dated 8-16-62, Agents of the Chicago Office were COMMENDED through him for their participation in such a noteworthy fashion in the investigation and apprehension of [REDACTED] the subjects of an Extortion case. b6

His daily average overtime for August, 1962, was 3 hours 2 minutes.

By letter dated 9-6-62, he was advised to COMMEND the Agents of the Chicago Office who performed in such an excellent manner in connection with the redevelopment of a highly confidential source of information in the criminal field. (RE: CG 6486-C*)

By letter dated 9-6-62, the personnel of the Chicago Office were COMMENDED, through him, for their fine assistance in connection with the FBI exhibit at the 125th Anniversary of the founding of the City of Chicago.

By letter dated 9-20-62, he was advised that Bureau records disclosed that Time Spent in Office by Agents (TIO) was 17.0% which was rather substantial and quite undesirable increase over the figure of 14.2% in July. He was instructed to give this matter close attention and insure that all TIO is absolutely necessary in the course of official business.

In a memorandum dated 9-28-62, to Mr. Tolson and to Mr. Mohr, the Director expressed a desire that SAC Gale be designated as Inspector in Charge of the Inspection Division at Headquarters.

By letter dated 9-28-62, he was ordered under transfer to the Seat of Government as Inspector in Charge of the Inspection Division.

His daily average overtime for September, 1962, was 3 hours 1 minute.

On 10-1-62, he expressed appreciation for his designation as Inspector in Charge of the Inspection Division.

On 10-14-62 he received a Basic Salary Increase to \$18,500 per annum in GS-17.

On 10-16-62 he arrived under transfer to the Inspection Division as Inspector in Charge.

The Director saw him on 10-16-62 and discussed with him the importance of the inspection work and the various problems and difficulties we had had in the operation of inspection work resulting in it now being placed in a separate division. Mr. Gale showed marked enthusiasm for his new assignment and it was believed he would enter into his new duties with enthusiasm.

His daily average overtime for October, 2 hours 54 minutes; November, 3 hours 9 minutes; December, 3 hours 3 minutes.

On 12-9-62 he received a Within Grade Increase to \$19,000 per annum in GS-17.

On 1-3-63 the Director saw Mr. Gale who was preparing to leave for New York to initiate an inspection of the New York Office and he wanted to receive any advice or counsel that the Director might desire to give him. The Director advised Mr. Gale of his views.

On 1-4-63 he was designated Assistant Director of the Inspection Division with no change in grade or salary.

By letter dated 1-4-63 he expressed appreciation to the Director for this designation.

His daily average overtime for January, 3 hours 41 minutes; February, 3 hours 28 minutes.

The Director saw him on 2-4-63 and Mr. Gale expressed appreciation for his promotion to the position of Assistant Director of the Inspection Division. The Director was particularly impressed with the penetrative manner in which Mr. Gale had conducted the New York Inspection and his minute familiarity with many of the aspects of the operations of the New York Division.

On 3-31-63 Mr. Tolson rated him OUTSTANDING.

His daily average overtime for March, 3 hours 43 minutes; April, 3 hours 1 minute.

By letter dated 4-9-63, he received an INCENTIVE AWARD in the amount of \$500.00 for his superior services from 4-1-62 to 3-31-63, which rated an Outstanding Performance Report.

His daily average overtime for May, 1963, was 2 hours 54 minutes; June, 3 hours 4 minutes; July, 2 hours 55 minutes; August, 2 hours 48 minutes; September, 2 hours 47 minutes; October, 2 hours 51 minutes.

Effective 11-1-63, he was promoted to Grade GS-18, \$20,000 per annum.

The Director saw him on 11-5-63, when he called to express his appreciation for his promotion to Grade GS-18. The Director discussed with him the great importance and value of the inspection work which his division carried on and the need for it to be most penetrative so we may have "hard-hitting" operations in the field and at the Seat of Government.

On 11-29-63, the Director CONGRATULATED him on his Twenty-fourth Anniversary in the Bureau. He expressed appreciation for the Director's congratulatory message.

His daily average overtime for November, 1963, was 2 hours 54 minutes.

Memorandum dated 12-4-63, reflected he voluntarily worked on 11-25-63, in connection with the emergency case occasioned by the assassination of the President.

His daily average overtime for December, 1963, was 2 hours 46 minutes; January, 1964, 2 hours 40 minutes; February, 2 hours 55 minutes.

On 2-18-64, the Director saw him at which time the Director expressed his views concerning the forthcoming inspection of the New York Office.

On 3-31-64, he was rated OUTSTANDING.

His daily average overtime for March, 1964, was 2 hours 51 minutes.

By letter dated 4-14-64, he received an INCENTIVE AWARD in the amount of \$500.00 in recognition of his superb services from 4-1-63 to 3-31-64, which merited an Outstanding Performance Rating. He subsequently expressed appreciation for this consideration.

His daily average overtime for April, 1964, was 3 hours 25 minutes; May, 3 hours 41 minutes; June, 2 hours 37 minutes.

Effective 7-5-64, he received a Basic Increase to \$24,500 per annum in Grade GS-18.

His daily average overtime for July, 1964, was 2 hours 34 minutes; August, 2 hours 19 minutes; September, 2 hours 48 minutes; October,

2 hours 34 minutes; November, 2 hours 31 minutes.

On 11-13-64 the Director saw Assistant Director Gale of the Inspection Division and stated he made an excellent personal appearance and had had extensive background experience in the Bureau, having served in a number of field offices and later as ASAC at Anchorage and SAC at Anchorage, Richmond and Cincinnati when he was transferred to Washington where he has served in the Training and Inspection Division; he was then named SAC of the Washington Field Office and later made SAC of the Chicago Office, after which he was brought back to Washington and named Assistant Director in charge of the Inspection Division. The Director told Mr. Gale that he planned to transfer him to the Assistant Directorship which was being vacated by Mr. Courtney Evans of the Special Investigative Division. The Director discussed with him generally the work of that Division and the need for firm but fair administration of it. The Director emphasized the fact that he wanted intensification in regard to the campaign which we have carried on against the hoodlum element in the country.

Effective 12-15-64 he was designated Assistant Director in Charge of the Special Investigative Division.

His daily average overtime for December, 1964, 2 hours 44 minutes; January, 1965, 2 hours 34 minutes; February, 2 hours 33 minutes.

By letter dated 2-4-65 the agents assigned to the Special Investigative Division who worked on the investigation leading to the apprehension of Top Ten Fugitive Walter Lee Parman, the subject of an Unlawful Flight to Avoid Prosecution-Murder case, were COMMENDED, through him.

On 3-31-65 he was rated OUTSTANDING.

His daily average overtime for March, 1965, 2 hours 58 minutes; April, 2 hours 30 minutes.

By letter dated 4-8-65 personnel in the Special Investigative Division who had displayed such a fine attitude in handling much of the stenographic and clerical work incident to a number of specials, were COMMENDED, through him. (Re: Special Inquiries - White House).

By letter dated 4-14-65 he received an INCENTIVE AWARD in the amount of \$500.00 in recognition of his services for the period 4-1-64 to 3-31-65 which merited him an Outstanding performance rating.

His daily average overtime for May, 1965, 2 hours 38 minutes; June, 3 hours 4 minutes.

By letter dated 6-15-65 the personnel in the Special Investigative Division who participated so capably in a Special Inquiry matter of interest to the Bureau were COMMENDED, through him. (Re: [redacted] aka, Special Inquiry).

b6

By letter dated 7-15-65 Messrs. Thomas J. McAndrews, [redacted] were COMMENDED, through him, for the noteworthy manner in which they supervised from the Seat of Government the investigation of the Anti-Racketeering case involving Samuel M. Giancana, recognized leader of organized crime in Chicago.

By letter dated 7-19-65 the Director CONGRATULATED him on his Twenty-fourth Anniversary with the FBI.

By letter dated 7-28-65 the personnel of the Special Investigative Division who participated in the American Red Cross Blood Donor program during the past fiscal year were COMMENDED, through him.

His daily average overtime for July, 1965, 2 hours 41 minutes; August, 2 hours 25 minutes; September, 2 hours 33 minutes; October, 2 hours 44 minutes.

On 10-10-65 he received a Basic Salary Increase to \$25,382 per annum in GS-18.

DURING AN INSPECTION OF THE SPECIAL INVESTIGATIVE DIVISION IN SEPTEMBER - OCTOBER, 1965, INSPECTOR H. L. EDWARDS stated he had an outstanding appearance, an aggressive, positive personality. His extensive field experience coupled with an excellent command of policy and procedures fit him admirably for the challenges of fighting organized crime. He had a positive and progressive approach to the work and inspired respect and confidence of associates. The various functions of the Division were rated as follows:

PHYSICAL CONDITION AND MAINTENANCE	VERY GOOD
SPECIFIC DIVISION OPERATIONS	VERY GOOD
ADMINISTRATIVE OPERATIONS	VERY GOOD
PERSONNEL MATTERS	EXCELLENT
CONTACTS	EXCELLENT

By letter dated 11-1-65 he was advised of the results of the recent inspection. He was advised, among other things, to take prompt corrective action to Anti-Racketeering, Interstate Transportation in Aid of Racketeering, and Selective Service matters. The noteworthy increase in fugitives apprehended was good, but the picture was clouded by the fact that approximately one-fifth of the general fugitive and deserter cases were over six months old and about one-tenth

respect and confidence of employees in his Division. The various functions of the Division were rated as follows:

PHYSICAL CONDITION AND MAINTENANCE	VERY GOOD
SPECIFIC DIVISION OPERATIONS	VERY GOOD
ADMINISTRATIVE OPERATIONS	VERY GOOD
PERSONNEL MATTERS	EXCELLENT
CONTACTS	EXCELLENT

By letter dated 11-28-66, he was advised to carefully review the inspection findings and advise of the corrective action taken.

His daily average overtime for November, 1966, was 3 hours 6 minutes; December, 2'49". January, 1967 was 2'38"; February, 2'21".

On 3-31-67, he was rated OUTSTANDING.

His daily average overtime for March, 1967 was 2'26".

By letter dated 4-7-67, Mr. [REDACTED] was COMMENDED, THROUGH HIM, for having so effectively conducted tours of the FBI during the Easter Season. b6

By letter dated 4-10-67, he received an INCENTIVE AWARD of \$500 in special recognition of his exceptional performance during the period 4-1-66, to 3-31-67, which had merited an Outstanding performance rating.

By letter dated 4-11-67, Mr. Gale expressed his appreciation and gratitude to the Director for the above award.

His daily average overtime for April, 1967 was 6'47"; May, 5'54"; June 2'20"

On 7-7-67, the personnel of the Special Investigative Division who so ably assisted with the compilation of necessary data for the Wanted Flyers and the Identification Orders for placing the two most recent subjects on the "Ten Most Wanted Fugitives" list were COMMENDED, THROUGH HIM.

By letter dated 7-19-67, the Director extended his Congratulations on this, his 26th Anniversary of service. By letter dated 7-19-67, Mr. Gale expressed appreciation to the Director for his thoughtfulness in remembering his 26th Anniversary.

On 7-20-67, the agents in the Criminal Intelligence and Organized Crime Section were COMMENDED, THROUGH HIM, for their supervision in the field of organized crime relating to gambling activities. Statistical accomplishments exceeded all prior years since the passage of the gambling statutes.

Letter 7-26-67, COMMENDED, THROUGH HIM, the personnel in the Special Investigative Division for the splendid supervision which they afforded the field relative to fugitive matters which contributed to the excellent accomplishment record compiled during the 1967 Fiscal Year.

His daily average overtime for July, 1967 was 2'18".

Letter 8-9-67, COMMENDED, THROUGH HIM, the personnel in the Special Investigative Division for their splendid participation in the Bureau's Blood Donor Program during Fiscal Year 1967.

His daily average overtime for August, 1967 was 2'22".

Letter 9-27-67, COMMENDED, THROUGH HIM, the exceptional performance of the personnel involved in an expedite project involving inquiries of eleven individuals. (RE: White House Inquiries)

By letter to the Director dated 9-29-67, Mr. Gale stated he was greatly impressed by the marvelous and richly deserving tribute given him at the Former Special Agents Society luncheon he attended. His terrific remarks electrified and captivated all who were present. In acknowledgment, on 9-29-67, the Director thanked Mr. Gale for his comments.

His daily average overtime for September, 1967 was 2'13".

On 10-8-67, he received a Basic Salary Increase to \$27,055 per annum in GS-18.

DURING AN INSPECTION OF THE SPECIAL INVESTIGATIVE DIVISION OCTOBER 16 to NOVEMBER 1, 1967, INSPECTOR [REDACTED] stated he had been in charge of the Division since 12-15-64, and was a firm and capable administrator with a thorough grasp of policies and procedures. He made an outstanding appearance, enthusiastic and aggressive and was well versed in problems encountered by the Division in all areas of responsibility. He was providing positive, effective leadership and had respect of employees under his direction. The various functions of the Division were rated as follows:

PHYSICAL CONDITION AND MAINTENANCE	.....	VERY GOOD
SPECIFIC DIVISION OPERATIONS	.....	EXCELLENT
ADMINISTRATIVE OPERATIONS	.....	VERY GOOD
PERSONNEL MATTERS	.....	EXCELLENT
CONTACTS	.....	EXCELLENT

By letter dated 11-8-67, he was advised of the results of the above inspection and advised to carefully review the findings of the inspection report and work papers and advise of the corrective action taken.

His daily average overtime for October, 1967 was 2'42"; November, 2'37"; December, 2'38". January, 1968 was 2'26"; February, 2'52"; March, 2'35".

On 3-31-68 he was rated OUTSTANDING.

By letter dated 4-2-68, he received an INCENTIVE AWARD in the amount of \$500 in recognition of his continued superior performance. He expressed APPRECIATION for the Outstanding Performance Rating and incentive award in a letter to the Director.

His daily average overtime for April, 1968, 2' 43"; May, 2' 27"; June, 2' 42"; July, 2' 21".

On 7-14-68 he received a Basic Increase to \$28,000 per annum in GS-18.

By letter dated 7-19-68 the Director CONGRATULATED him on his Twenty-seventh Anniversary in the FBI.

By letter dated 7-19-68, the personnel of the Special Investigative Division were COMMENDED, through him, for their exemplary participation in the Bureau's Blood Donor Program during fiscal year 1968.

His daily average overtime for August, 1968, 2' 45".

DURING AN INSPECTION OF THE SPECIAL INVESTIGATIVE DIVISION AUGUST 29 to SEPTEMBER 13, 1968, INSPECTOR L. M. WALTERS stated he was firm, capable administrator with full grasp of all areas of responsibility of Division. Outstanding appearance, dedicated, enthusiastic and dynamic. Provided positive leadership and had respect of employees under his direction. The various functions of the Division were rated as follows:

PHYSICAL CONDITION AND MAINTENANCE.....	EXCELLENT
SPECIFIC DIVISION OPERATIONS.....	EXCELLENT
ADMINISTRATIVE OPERATIONS.....	VERY GOOD
PERSONNEL MATTERS.....	VERY GOOD
CONTACTS.....	EXCELLENT

By letter dated 9-19-68, he was advised of the results of the above inspection and advised to carefully review the findings and advised of the corrective action taken.

His daily average overtime for September, 1968, 2' 39"; October, 2' 21"; November, 2' 09"; December, 2' 19"; January, 2' 42".

By letter dated 1-9-69, two Agents were COMMENDED, through him, for their fine performance of duty incident to the investigation of a large number of Selective Service Act cases involving fraudulent enlistments in the Illinois National Guard.

His daily average overtime for February, 1969, 2' 32"; March, 2' 33".

On 3-31-69 he was rated OUTSTANDING. He expressed APPRECIATION for the Rating in a letter to the Director.

By letter dated 4-4-69, the Agents in the Special Investigative Division who voluntarily reported to work on 3-31-69, were COMMENDED, through him.

His daily average overtime for April, 1969, 2' 18"; May, 2' 20"; June, 2' 37".

By letter dated 6-23-69 he was CENSURED inasmuch as he indicated that he was aware that the SAC of the Newark and Philadelphia Offices had been contacted with regard to the contents of a communication to Congressman Fred B. Rooney in response to an inquiry he made in connection with information received by the Newark Office in 1965. However, he did not personally verify the proposed acknowledgment with either of these two employees.

On 7-13-69 he received a Basic Increase to \$33,495 per annum in GS-18.

By letter dated 7-18-69 the Director CONGRATULATED him on his Twenty-eight Anniversary in the Bureau.

By letter dated 7-24-69 the personnel in the Special Investigative Division who contributed substantially to the Bureau's Blood Donor Program were COMMENDED, through him.

His daily average overtime for July, 1969, 2' 16"; August, 2' 32"; September, 2' 11".

By letter dated 9-11-69, the personnel in the Special Investigative Division who performed so capably in giving tours of the FBI facilities during the past season were COMMENDED, through him.

DURING AN INSPECTION OF THE SPECIAL INVESTIGATIVE DIVISION IN SEPTEMBER, 1969, INSPECTOR L. M. WALTERS stated he made an outstanding appearance, loyal, enthusiastic and dynamic. He was firm, capable administrator with excellent grasp of Division's overall responsibilities. Provided positive leadership and had respect of his employees. The various functions of the Division were rated as follows:

PHYSICAL CONDITION AND MAINTENANCE.....	EXCELLENT
SPECIFIC DIVISION OPERATIONS.....	VERY GOOD
ADMINISTRATIVE OPERATIONS.....	EXCELLENT
PERSONNEL MATTERS.....	VERY GOOD
CONTACTS.....	EXCELLENT

By letter dated 10-7-69 he was advised of the results of the above inspection findings and advised to carefully review the findings and advise of the corrective action taken.

His daily average overtime for October, 1969, 2' 12"; November, 2' 33"; December, 2' 01".

On 12-28-69 he received a Basic Increase to \$35,505 per annum in GS-18.

His daily average overtime for January, 1970, 2' 13"; February, 2' 13".

By letter dated 2-4-70, the Section Chief and the personnel of the Special Investigative Division who participated so capably in the handling of a Departmental Applicant case, were COMMENDED, through him.

His daily average overtime for March, 1970, 2' 18".

On 3-31-70 he was rated OUTSTANDING. He expressed APPRECIATION for the rating in a letter to the Director.

By letter dated 4-17-70, the clerical personnel of the Special Investigative Division who rendered such effective service in connection with the preparation of summaries of two Departmental Applicant cases were COMMENDED, through him.

By letter dated 4-27-70, inasmuch as inquiry revealed that personnel under his supervision failed to make a determination concerning the listing of certain cases, and as a result information was furnished to the Department resulting in a misunderstanding, he was CENSURED.

His daily average overtime for April, 1970, 2' 19"; May, 2' 09".

By letter dated 5-21-70, the Agents of the Special Investigative Division who rendered such effective service relative to two Departmental Applicant cases, were COMMENDED through him.

By letter dated 5-28-70 he was COMMENDED for the outstanding supervision he afforded from the Seat of Government to the investigation involving [redacted] and others, the subjects of an Interstate Transmission of Wagering Information case.

His daily average overtime for June, 1970, 2' 14"; July, 2' 14".

b6

By letter dated 7-9-70 the personnel of the Departmental Applicant Unit of the Special Investigative Division who had performed in such an admirable way during the past fiscal year, were COMMENDED, through him.

By letter dated 7-17-70 the Director CONGRATULATED him on his Twenty-ninth Anniversary in the FBI.

By letter dated 7-27-70 the personnel in the Fugitive Section who contributed so substantially to the excellent record attained in fugitive accomplishments throughout the Bureau, were COMMENDED through him.

By letter dated 8-7-70 the personnel of the Special Investigative Division who had contributed so generously to the Bureau's Blood Donor Program during the past fiscal year were COMMENDED through him.

His daily average overtime for August, 1970, 2' 19"; September, 2' 27"; October, 2' 43".

By letter dated 10-2-70 the personnel of the Special Investigative Division who performed in such an admirable manner relative to a Special Inquiry matter of great interest, were COMMENDED through him.

By letter dated 10-14-70 he was CENSURED inasmuch as he failed to promptly keep the Director advised of the receipt of very pertinent photographs of an individual who was being sought under the Bureau's Top Ten Fugitive Program.

By letter dated 10-20-70 the Agents of the Special Investigative Division who performed in such a noteworthy manner relative to the investigations of numerous Departmental Applicant cases, were COMMENDED through him.

DURING AN INSPECTION OF THE SPECIAL INVESTIGATIVE DIVISION IN NOVEMBER, 1970, INSPECTOR E. S. MILLER stated he made outstanding appearance; experienced, capable administrator. He was loyal and enthusiastic; provided firm leadership and had excellent knowledge of Bureau's policies and procedures. The various functions of the Division were rated as follows:

PHYSICAL CONDITION AND MAINTENANCE.....	VERY GOOD
SPECIFIC DIVISION OPERATIONS.....	EXCELLENT
ADMINISTRATIVE OPERATIONS.....	EXCELLENT
PERSONNEL MATTERS.....	VERY GOOD
CONTACTS.....	EXCELLENT

By letter dated 12-7-70, he was advised of the results of the above inspection and advised to carefully review the findings and advised of the corrective action taken.

His daily average overtime for November, 1970, 2' 22"; December, 2' 17".

By letter dated 12-29-70 he was COMMENDED for the excellence of his performance relative to nationwide gambling raids conducted by the FBI on 12-12-70.

On 1-10-71 he received a Basic Increase to \$6,000 per annum in GS-18.

His daily average overtime for January, 1971, 2' 06"; February, 2' 12"; March, 2' 18".

By letter dated 3-17-71, the Director THANKED him for his letter concerning his appearance before the House Subcommittee on Appropriations.

On 3-31-71 he was rated OUTSTANDING and in recognition thereof, he received an INCENTIVE AWARD in the amount of \$500. He expressed APPRECIATION for the rating and the Award in a letter to the Director.

By letter dated 4-7-71 the Director expressed his APPRECIATION for Assistant Director Gale's support concerning the recent articles in the Washington Post, Life Magazine, and Newsweek.

By letter dated 4-23-71 the personnel in the Departmental Applicant Unit of the Special Investigative Division who had performed so admirably over the past several months, were COMMENDED through him.

His daily average overtime for April, 1971, 2' 11"; May, 2' 19".

By letter dated 5-4-71 he expressed APPRECIATION for the color portrait of the Director.

By letter dated 5-26-71 he was COMMENDED for the noteworthy guidance and direction he afforded to the field in connection with gambling raids recently carried out by the Detroit Division.

His daily average overtime for June, 1971, 2' 12"; July, 1' 55".

On 7-19-71 the Director personally presented him with his Thirty-Year Service Award Key.

By letter dated 7-20-71 he was COMMENDED, and through him, the personnel of the Fugitive Section of the Special Investigative Division who assisted so capably in the extremely fine statistical accomplishments attained during Fiscal Year 1971.

His daily average overtime for August, 1971, 2' 05".

By letter dated 9-7-71 the Director expressed APPRECIATION for the decision he had reached concerning the offer he had received from Doubleday and Company about the possibility of a book on his experience in the FBI.

He retired effective 10-1-71 active duty having ceased 9-13-71. In connection with his retirement the Director personally presented him with his badge, which had been mounted, plaque of service keys and cuff links and a photograph was made in commemoration of the occasion. He expressed APPRECIATION in a letter to the Director. His name was placed on the Special Correspondents' List.

OFFICE OF PREFERENCE

01144
EMPLOYEE NO.

GALE JAMES H
NAME

294-01-8383
SOC. SEC. NO.

[illegible]

(F) NAMES OF ALL RELATIVES INCLUDING THOSE BY MARRIAGE NOW OR PREVIOUSLY EMPLOYED BY THE FBI:

NAME	EXACT RELATIONSHIP	PRESENT EMPLOYEE	FORMER EMPLOYEE
<div></div>	Brother		X
	Sister		X
	Brother-in-law		X
	Brother-in-law	X	

b6

(G) NAMES OF ALL RELATIVES INCLUDING THOSE BY MARRIAGE NOW IN GOVERNMENT SERVICE:

NAME	EXACT RELATIONSHIP	GOVERNMENT AGENCY WHERE EMPLOYED
None		

(H) ORGANIZATIONS: *ALL EMPLOYEES list all organizations to which you presently belong - do not abbreviate. ONLY SPECIAL AGENTS list former membership in Boy Scouts (indicating exact rank attained) and affiliation with fraternal, honorary or professional groups while in college. NON-AGENTS need not list former memberships at any time.*

NAME	PRESENT (All Employees)	FORMER (Agents Only)	CITY AND STATE
None			

(I) CURRENT SCHOOL ATTENDANCE STATUS (*NON-AGENTS only*): ARE YOU ATTENDING COLLEGE, OR ANY OTHER TYPE OF SCHOOL? ☐ NO ☐ YES INDICATE NAME OF INSTITUTION AND SUBJECTS IN WHICH ENROLLED.

(J) PERSON TO BE NOTIFIED IN CASE OF EMERGENCY:

NAME Mrs. James H. Gale RELATIONSHIP Wife
ADDRESS 3307 Rocky Mount Road, Fairfax, Virginia 22030

James H. Gale
(Signature)
Assistant Director
(Title)

(Please type or print)

Name (As it appears on Bureau rolls) **James H. Gale** Date **7/27/60**
Check one: SA ☒ SAA ☐ Date of Birth **9/28/21** EOD **11/29/39**

Education

Name of School	Location	Dates		Degree (Give descriptive title, i.e., BS in Civil Eng.)
		From	To	
College				Major _____ Minor _____
Graduate School				Major _____ Minor _____
Western Reserve Law School	Cleveland, Ohio	1942	1943	
John Marshall School of Law	Cleveland Ohio	1940	1943	Major _____ Minor LL.B. Degree
Miscellaneous or Special Schools (Include Vocational and Radio Schools)				

List all college courses studied in mathematics, engineering and sciences, including chemistry, physics, biology, radio, communications, etc., regardless whether degree obtained. (Use supplemental sheet if necessary.)

Course	Hours	Course	Hours	Course	Hours	Course	Hours

BARS: Federal _____ Year _____ State _____ Year _____ CPA (State) _____ Year _____
Other _____

Foreign Language and Dialects

(Evaluate your proficiency in each phase as Excellent, Very Good, Good, Fair, or Unsatisfactory.)

Name of Language	Read	Write	Speak	Understand	Translate
None					

Source of Proficiency

Name of Language	Native Tongue	Bureau School	Academic	No. Yrs. Studied	Foreign Assignment	Bur. Test Taken	
						Yes	No

If you can handle any foreign language or languages fluently with little or no hesitation, and without use of a dictionary specify same.

If you have had any TRAINING or EXPERIENCE in the writing field including newspaper reporting, writing for a periodical, and creative writing of any kind, set forth as follows:

Training College-Courses	No. of Hours	Experience	Period of Experience
None			

167-107 RECORDED
10 SEP 1 1960

Previous Employment

Type of work and in what capacity	Proficiency	Period of Experience
Miscellaneous odd jobs in high school.		
Bureau is only job I have had except for		
service in U. S. Navy.		

Vocations and Avocations

(Give detailed information regarding any special knowledge, abilities, talents, hobbies, trades, etc., you possess, including athletics.)

Vocation or Avocation	Professional	Amateur	Proficiency	Period of Experience
Golf		X	Fair	15 years

If you feel your experience in any of your previous employments, vocations or avocations is sufficient so that you could use it as a cover in an undercover assignment, identify same.

Foreign Travel

List all foreign countries you have traveled in; in what capacity, and period there.

Canada - 7 days - October, 1951; en route to Anchorage, Alaska, on transfer
Tokyo, Japan - 1 week - December, 1958; Inspector - FBI

Military Training

Active duty: Branch U. S. Navy Dates of Service Aug. 1944-Feb. 1946 Rank Specialist Q 2nd Class
Specialized Military Training Communications Intelligence

Are you interested in Foreign Assignment? ☐ Yes ☒ No Location desired _____
Typing ability 50 W.P.M. Have you passed Bureau test? ☒ Yes ☐ No
Shorthand ability _____ W.P.M. Have you passed Bureau test? ☐ Yes ☐ No
Name of Shorthand system you use _____

Practical Experience in Radio

(State degree of proficiency and length of time spent)

Amateur Radio _____ Licenses Held _____
Commercial Radio Operator _____
Radio, Television or Sound Repairman or Technician _____
Experimenter or other _____
International Morse Code: Transmit _____ W.P.M. Receive _____ W.P.M.
Technical Knowledge of any Electronic Devices _____

Miscellaneous

List any other information, qualifications and accomplishments.

LBN:AVH

May 31, 1940

RE: JAMES H. GALE - Typist
Cleveland

Efficiency rating	Fair	5-1-40
Previous efficiency rating		
Entered on duty	11-29-39 (Temporary)	
	1-29-40 (Permanent)	
Grade and salary	Caf-3; \$1,620	
Last salary change	January 29, 1940	
Last test ratings:		
Stenographic		
Typing	87.5%	
Teletype		

Mr. Tolson _____
Mr. Nathan _____
Mr. E. A. Tamm _____
Mr. Clegg _____
Mr. Ladd _____
Mr. Coffey _____
Mr. Egan _____
Mr. Glavin _____
Mr. Harbo _____
Mr. Hendon _____
Mr. Lester _____
Mr. McIntire _____
Mr. Nichols _____
Mr. Rosen _____
Mr. Quinn Tamm _____
Tele. Room _____
Adm. Files _____
Pers. Files _____
Mr. Tracy _____
Miss Gandy _____

REMARKS

SAC Listerman advises that this employee, while only possessing a high school education, is loyal, ambitious, and has been developing satisfactorily and puts in a large amount of overtime. His rating of fair, was due to his lack of experience.

SAC Guinane on December 12, 1939, states that this employee turns out an excellent volume of work but is inexperienced.

SAC Listerman on January 8, 1940, states this employee puts in a large amount of overtime and despite his inexperience and immaturity makes a good appearance and is learning rapidly.

RECOMMENDATION

No change in salary is suggested at this time.

L. B. NICHOLS

0
Sale, James H.



Hollinger Corp.
pH 8.5

JAMES H. GAILE

8/31/71

Spec. Invest. Dev.

*James Henry
Gaile*

SEP 9 1946 C/10



James H. Gale

James H. Gale 4-29-59

JAMES H. GALE
10-16-62

OS

JAMES H. GALE

1-9-56

#10

JAMES H. GALE

10-6-61



17 10



17 10



17 10



James H. Gale
Class #17
E.O.D. 6/21/48

JUN '46

#10

James H.
Gale

#17

James H.
Gale

#17

JAMES H. GALE

James H. Gale

3451

III

1952

James H.
Gale

#17

36

6/

FEDERAL BUREAU OF INVESTIGATION
UNITED STATES DEPARTMENT OF JUSTICE

APPLICATION FOR APPOINTMENT

DIRECTOR,
FEDERAL BUREAU OF INVESTIGATION,
UNITED STATES DEPARTMENT OF JUSTICE,
WASHINGTON, D. C.

Cleveland, Ohio

November 18, 1939, 1939

SIR:

I hereby make application for appointment to the position indicated by check mark, in the Federal Bureau of Investigation, United States Department of Justice, and for your use in this connection submit the following information:

Special Agent	<input type="checkbox"/>
Special Agent (Accountant)	<input type="checkbox"/>
Stenographer	<input type="checkbox"/>
Typist	<input checked="" type="checkbox"/>
Laboratory Technician	<input type="checkbox"/>
Messenger	<input type="checkbox"/>
<input type="checkbox"/>	

(Indicate by check)

(This application should be typewritten if possible)

1. Name in full (please print) Gale, James Henry
(Family name) (Given name) (Middle name)
- (a) Female applicants must furnish maiden name _____
2. Legal residence 1453 Olivewood Avenue
3. Mail and telegraphic address 1456 Olivewood Avenue
4. Date of birth Sept. 28, 1919 Weight 150 lbs. Height 6' 2" Color White
5. Place of birth Cleveland, Ohio
6. (a) Father's name James Henry (b) Father's birthplace Cleveland, Ohio
7. (a) Mother's maiden name Violet Schackla (b) Mother's birthplace Brooklyn, N.Y.
8. If you were not born in United States, how long have you lived here? _____
9. Are you a citizen of the United States? Yes
10. If naturalized, date and place of naturalization 12 1-1-40 4
11. Are you single, married, widowed, separated, or divorced? Single
(Specify)
12. If your husband (or wife) is employed, state where employed 1012 10th St
13. Number of children, if any _____
14. Are you entirely dependent on your salary? Yes
15. To what extent are you financially indebted to others and to whom? No Indebtedness

16. Education: (Please print.) FC

	NAME AND LOCATION OF SCHOOL	FROM—	TO—	COURSES PURSUED, DIPLOMAS OR DEGREES RECEIVED
(a) Elementary-----	St. Colman's Cleve. Ohio-----	1927-----	1930-----	General-----
	Pearl Road Parma. Ohio-----	1930-----	1933-----	General-----
(b) High school equivalent-----	Emerson Jr. Hi Lkwd.. Ohio-----	1933-----	1933-----	Commercial-----
	Lkwd. High Lkwd.. Ohio-----	1936-----	1939-----	Commercial-----
(c) College or technical-----				
(d) Miscellaneous-----				

17. Give names of clubs, societies, and other similar organizations of which you are a member:

Clementine Club, Peace Club

18. Are you physically capable of discharging the duties of the position sought? (Any physical defects should be fully described) Yes

19. Health record for the past 3 years (give number of days of illness and nature of ailments):

No illness

20. Experience: (Please print.)

NAME AND ADDRESS OF EMPLOYER	POSITION	FROM—	TO—	ANNUAL SALARY
Ratner's Pharmacy 14239 Detroit Avenue	Clerk	June 1939	June 1939	300
Ohio Provision Company West 61st and Clark Avenue	Labor	August 1939	November 1939	\$1200

21. Have you ever been arrested? No

Specify: _____

22. Have you ever been a defendant in any court action? No

Specify: _____

23. Give five personal references (not relatives, former employers, fellow employees, or school teachers), more than 30 years of age, who are householders or property owners, business or professional men or women (including your family physician, if you have one) of good standing in the community, and who have known you well during the past 5 or more years. (Please print.)

NAME	RESIDENCE ADDRESS	NUMBER OF YEARS ACQUAINTED	BUSINESS ADDRESS
1. Mr. J. P. Hogan	15403 Norway Avenue	18	Ohio Provision Co. West 61st and Clark
2. 		5	Ohio Provision Co. West 61st and Clark
3. 		5	Ratner's Pharmacy 14239 Detroit Ave.
4. Mr. P. Kerrigan	1310 W. 64th Street 1274 Weber Road	12	County Court House
5. Mr. J. Donnelly	Columbus, Ohio	15	State Capitol

24. List the names of any relatives now in the Government service, with the degree of relationship, and where employed:

None

25. What is the lowest entrance salary you will accept? \$1200 a Year

26. Are you in a position to accept probationary employment at any time, without previous notice, and, if notice is required, how much? I do not require previous notice

27. In the event of appointment will you be willing to proceed to Washington, D.C., upon 10 days' notice and at your own expense? Yes

28. If appointed are you willing and prepared to accept assignment or transfer to any part of the United States where services are required, for either temporary or permanent duration? Yes

29. Attach unmounted face photograph not larger than 3 by 4¼ inches. Write your name plainly on back of photograph. Photograph to be taken *not more than 30 days prior to date of application.*



Respectfully,

James Gale
(Signature of applicant as usually written)

NOTE.—If the applicant desires to make any further remarks or statements concerning his qualifications or in answer to any question contained in the application, the same should be made on a separate sheet of paper, numbering the remarks in accordance with the original questions.

NOTE.—The following jurat must be subscribed to by all applicants for positions in the Federal Bureau of Investigation, U.S. Department of Justice.

Subscribed and duly sworn to before me by the above-named applicant, this 18th day of November, 1939, at city (or town) of Cleveland, county of Cuyahoga, and State (or Territory or District) of Ohio

[OFFICIAL IMPRESSION SEAL]

Mary Crawley
(Signature of officer)

(Official title)

UNITED STATES GOVERNMENT

Memorandum

TO : Mr. Gale *[Signature]*

DATE: 4/24/70

FROM : W. V. Cleveland *[Signature]*

James H. Gale

SUBJECT: APPLICANT INVESTIGATIONS
FOR THE DEPARTMENT

William V. Cleveland

On 1/26/70 I submitted a memorandum indicating that the Department had advised that they expected to go far beyond their original estimates for Fiscal Year 1970 and that they believed there would be money available for this purpose through the Law Enforcement Assistance Act. Attached to this memorandum was a tabulation showing estimates placed in the Bureau's budget for Fiscal Year 1970, as well as cases received as of 1/23/70, as follows:

Branch	Estimates	Rec'd as of 1/23
Administrative Division	750 (P76) (C715)	715
BNDD	370 (P254) (C95)	349
INS	750	356
Bureau of Prisons	700	302
APACS	400	188
Maintenance	1100	391
TOTAL	4070	2301
Professional	1000	602
To go		398

67-137700-486
10 MAY 13 1970
To go 1769

To go 398 ^{15 MAY 12 1970}

At this time I was instructed to stop counting Maintenance Employee cases* along with other cases being received from the Department because they were not Departmental Applicant investigations. This I did.

*by the Administrative Division (MOH)

[Signature]
CLASSIFYING
MAY 20 1970
24

WM
MAY 20 1970

100-200-1000
9 DEC

Tolson _____
DeLoach _____
Walters _____
Mohr _____
Bishop _____
Casper _____
Callahan _____
Conrad _____
Felt _____
Gale _____
Rosen _____
Sullivan _____
Tavel _____
Soyars _____
Tele. Room _____
Holmes _____
Gandy _____

Memorandum to Mr. Gale
Re: APPLICANT INVESTIGATIONS
FOR THE DEPARTMENT

On 2/11/70 Mr. [] sent a letter to the Bureau tabulating their estimated increases in cases over estimates previously received, and in this letter no mention was made of Pardon Attorney cases because we have never received estimates from the Department on these cases. A letter was sent back to Mr. [] on 2/17/70 advising we would require sufficient funds to cover the costs of investigations in excess of 3570 estimated (no mention was made of 400 Pardon Attorney cases estimated in our budget). Another letter sent to Mr. [] 3/6/70 pointing out it would be necessary to obtain reimbursement for all cases handled over the original estimate of 3570. b6

On 3/18/70 I wrote a memorandum pointing out that the Department had reached their original estimate of 3570 and the Director instructed that no more cases be accepted. On 3/20/70 a letter was written to the Deputy Attorney General (DAG) advising that no more cases would be accepted during the current Fiscal Year since the Department had reached their original estimate of 3570.

On 4/6/70 I wrote a letter to the DAG advising that inasmuch as the Department had agreed to reimburse the Bureau for cases handled in excess of 3570, we were taking steps to reinstitute these investigations immediately.

On 4/14/70 a memorandum was prepared showing a tabulation of professional cases received, which totaled 1139 up to 3/18/70, and it was stated that the remaining 2432 cases were nonprofessional.

<u>BRANCH</u>	<u>ESTIMATE</u>	<u>RECEIVED</u>
<u>PROFESSIONAL</u>		
DAG	1000	708
BNDD		332
AAGA		95
INS		1
Bureau of Prisons		3
	<u>1000</u>	<u>1139</u>

Memorandum to Mr. Gale
Re: APPLICANT INVESTIGATIONS
FOR THE DEPARTMENT

The first time I indicated that we were counting Pardon Attorney cases was on 4/15/70, when lists were furnished to the Administrative Division showing the names of cases handled for each division of the Department, and one of these lists showed 28 cases received from the Pardon Attorney.

On 4/15/70, I wrote a memorandum tabulating cases received from all divisions of the Department indicating that 248 cases had been received from the Pardon Attorney during the current Fiscal Year up to 4/14/70. Attached to this memorandum was a letter to Mr. [REDACTED] dated 4/16/70 containing the same tabulation and showing 248 cases had been received from the Pardon Attorney. b6

It is clear, however, that when the first communication was prepared to the Department, 2/17/70, utilizing the total estimate of 3570 and not taking into consideration 400 Pardon Attorney cases, with the proper foresight I should have done one of two things.

1. I should have immediately prepared a memorandum specifically pointing out that I was still counting cases from the Pardon Attorney although the 400 estimated in our budget were not being taken into consideration; or

2. I should have immediately on my own stopped counting Pardon Attorney cases and removed them from the total cases received from the Department.

ADDENDUM - ASSISTANT DIRECTOR JAMES H. GALE JH

While I did not personally handle this matter, I assume responsibility as head of the Special Investigative Division. b

*See recommendations
censure for Chairman +
himself - De Roach
agrees.
JH
4/24*

UNITED STATES GOVERNMENT

Memorandum

TO : MR. TOLSON

DATE: April 24, 1970

FROM : J. P. MOHR

SUBJECT: DEPARTMENTAL APPLICANT
INVESTIGATIONS (DAPLI)

Tolson ☒
DeLoach ☒
Walters ☒
Mohr ☒
Bishop ☒
Casper ☒
Callahan ☒
Conrad ☒
Felt ☒
Gale ☒
Rosen ☒
Sullivan ☒
Tavel ☒
Soyars ☒
Tele. Room ☒
Holmes ☒
Gandy ☒

Reference is made to the memorandum from Mr. DeLoach and me to you under date of 4/24/70 the third recommendation of which recommended that a separate memorandum be sent through containing recommendations for disciplinary action in connection with the above matter.

In the attached memorandum from Mr. Cleveland to Mr. Gale dated 4/24/70 with regard to that Division's responsibilities in connection with this matter it is indicated that Division should have made a determination on 2/17/70 as to whether they should or should not be counting the Pardon Attorney-type cases as Departmental Applicant Type cases. For their failure to do so Mr. Gale recommends censure for himself and Section Chief William V. Cleveland and Mr. DeLoach concurs in this recommendation.

REC-148

The Administrative Division has not maintained statistics with regard to the handling of this type of case, i. e. DAPLI as this is done in the Special Investigative Division. This is the first year in which the issue of reimbursement for such matters in excess of the number estimated has been raised.

The Administrative Division prepared and forwarded to the Assistant Attorney General for Administration by memorandum of 4/15/70 a voucher covering reimbursement in the total amount of \$284,480 for 68 professional and 332 non-professional investigations. These 400 cases represented in this billing were in excess of the 3570 cases for which provision had previously been made in our budget request for the fiscal year 1970. The voucher was prepared on the basis of a listing of 400 cases furnished by the Special Investigative Division. Included in this listing were 28 investigations conducted for the Pardon Attorney under the caption "application for pardon after completion of sentence." The significance of the inclusion of these cases in the listing furnished was not readily apparent to those responsible for the preparation of the voucher, i. e. Special Agent Supervisor Daniel J. Green and Assistant Director N. P. Callahan and they did not challenge the inclusion of these cases in the listing.

15 MAY 12 1970

Had Callahan and Green who were handling this matter questioned the inclusion of the 28 cases referred to from the Pardon Attorney before executing the voucher the misunderstanding which has occurred might have been avoided and it is regretted by them that the significance of these items was not recognized at the time but this in no way relieves them of their responsibility in this matter.

Encs.

JPM:gt (3)

MAY 25 1970

COPY SENT TO MR. TOLSON

RECOMMENDATIONS

2. It is also recommended that Assistant Director Callahan and Special Agent Supervisor Daniel J. Green be censured.

3. In view of the overall responsibility in this matter of Mr. DeLoach and myself, I recommend we likewise be censured for not insuring that there was proper coordination.

I certainly concur. When I send
them with "Important & Urgent"
slip any matter it should not
be delayed down the line
by De Loach & Mohr. There is
too much "executivitis" here.

May 28, 1970

PERSONAL

Mr. James H. Gale
Federal Bureau of Investigation
Washington, D. C.

Dear Gale:

I am especially pleased to commend you for the outstanding supervision you afforded from the Seat of Government to the investigation involving [redacted] and others, the subjects of an Interstate Transmission of Wagering Information case.

You may take justifiable pride in your contributions to this matter of paramount concern to the FBI and in the fine results achieved. I want you to know that I am indeed most appreciative.

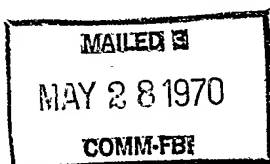
Sincerely yours,
J. Edgar Hoover

1 - Mrs. [redacted] (Sent Direct)

RHC:blg (4)

Based on memo Adams - Callahan 5-22-70 re [redacted] Et Al, Interstate Transmission of Wagering Information, Incentive award - Commendation matter.

Salutation per file.



MAIL ROOM ☐ TELETYPE UNIT ☐

Tolson _____
DeLoach _____
Walters _____
Mohr _____
Bishop _____
Casper _____
Callahan _____
Conrad _____
Felt _____
Gale _____
Rosen _____
Sullivan _____
Tavel _____
Soyars _____
Tele. Room _____
Holmes _____
Gandy _____

RECEIPT FOR GOVERNMENT PROPERTY
FEDERAL BUREAU OF INVESTIGATION
UNITED STATES DEPARTMENT OF JUSTICE

Date 6. 18 70

I certify that I have ☒ received ☐ returned the following Government property for official use:

D. C. OFFICIAL PARKING PERMIT #3148
expires 6-30-71

RETURNED

D. C. OFFICIAL PARKING PERMIT #3423 (det. 7-2-70 by)
expires 6-30-70

READ

The Government property which you hereby acknowledge is charged to you and you are responsible for taking care of it and returning it when its use has been completed.

DO NOT MARK OR WRITE ON IT OR MUTILATE IT IN ANY WAY.

Very truly yours,

(Signature)

(Typed name)

J. H. Gale

Mr. James H. Gale
FBI - Washington, D. C.

Howard W. Arendt

Robert H. Egan
William H. Burke
O. Eugene Coleman

b6

May 21, 1970

Mr. James H. Gale
Federal Bureau of Investigation
Washington, D. C.

Dear Mr. Gale:

I want to take this opportunity to commend, through you, those agents of the Special Investigative Division who rendered such effective service relative to two Departmental Applicant cases of paramount importance to the Bureau.

Everyone fulfilled his obligations skillfully and enthusiastically and, as a result, the FBI was able to meet its obligations. Please advise all concerned of my genuine appreciation for their noteworthy efforts.

Sincerely yours,

J. Edgar Hoover

MAILED 3

MAY 21 1970

COMM-FBI

1 - Mr. Gale (Personal Attention)

Re: Harry Andrew Blackmun and [redacted]

A copy of this letter will be placed in the files of all participants who were not individually recognized.

1 - Mrs. [redacted] (Sent Direct)

JAB:blg Bly (12)

8 JUN 16 1970

Based on memo Cleveland-Gale 5-12-70 and addendum
Administrative Division 5-14-70 re Harry Andrew
Blackmun, [redacted] Departmental
Applicants.

MAIL ROOM ☐ TELETYPE UNIT ☐

Copies prepared and attached for placing in the files of : OVER

July 9, 1970

Mr. James H. Gale
Federal Bureau of Investigation
Washington, D. C.

Dear Mr. Gale:

Through you, I want to commend the personnel of the Departmental Applicant Unit of the Special Investigative Division who have performed in such an admirable way during the past fiscal year.

Everyone handled his assignments with dispatch and accuracy and thereby insured that the important work of the unit was handled promptly and properly. Please express my appreciation to all concerned for a job well done.

Sincerely yours,
J. Edgar Hoover

1 - Mr. Gale (Personal Attention)

A copy of this letter will be placed in the files of all participants.

REC-137

1 - Mrs. [redacted] Sent Direct) b6

RHC:blg Bly (5)

7-1-70

Based on memo Cleveland-Gale/re Departmental Applicant Unit, Accomplishments.

REC'D - WONG

RECEIVED-106204

XEROX

JUL 21 1970

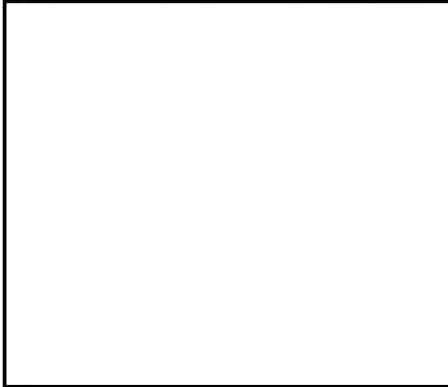
Copies prepared and attached for placing in files of: OVER

Rec'd
Tolson _____
DeLoach _____
Walters _____
Mohr _____
Bishop _____
Casper _____
Callahan _____
Conrad _____
Felt _____
Gale _____
Rosen _____
Sullivan _____
Tavel _____
Soyars _____
Tele. Room _____
Holmes _____
Gandy _____

MAIL ROOM ☐ TELETYPE UNIT ☐

Letter to Mr. James H. Gale
Washington, D. C.

Erkshell T. Zinn



b6

July 17, 1970

PERSONAL

Dear Gale:

Sunday marks your Twenty-ninth Anniversary in the FBI, and I wanted to take this means of extending my congratulations to you. You have seen the Bureau grow in stature during your tenure, and can take pride in the dedication and loyalty displayed by you. I hope the Bureau will have the benefit of your fine services for many years to come.

Sincerely,

J. EDGAR HOOVER

Mr. James H. Gale
Federal Bureau of Investigation
Washington, D. C.

REC-141

4-1377-491
10 JUL 17 1970

Anniversary 7/19 - Sunday

JEH:edm (3)

Tolson _____
DeLoach _____
Walters _____
Mohr _____
Bishop _____
Casper _____
Callahan _____
Conrad _____
Felt _____
Gale _____
Rosen _____
Sullivan _____
Tavel _____
Soyars _____
Tele. Room _____
Holmes _____
Gandy _____

MAIL ROOM ☐ TELETYPE UNIT ☐

SENT FROM D. O.
TIME 8:17 AM
DATE 7-17-70
BY 256

August 7, 1970

Mr. James H. Gale
Federal Bureau of Investigation
Washington, D. C.

Dear Mr. Gale:

I am indeed pleased to commend, through you, the personnel of the Special Investigative Division who have contributed so generously to the Bureau's Blood Donor Program during the past fiscal year.

The wholehearted and enthusiastic response to this important program by our employees is most noteworthy and, as a result, the Bureau has exceeded its quota. I am gratified by the interest shown in this regard and I want to express my appreciation to all participants.

Sincerely yours,

J. Edgar Hoover

1 - Mr. Gale (Personal Attention)

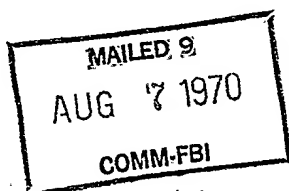
1 - Mrs. [redacted] (Sent Direct) b6

JAB:sma *sm*

(5)

Based on memo Adams-Callahan 7/29/70 re Blood Donor Program, American Red Cross, Bethesda Naval Hospital.

Tolson _____
Sullivan _____
Mohr _____
Bishop _____
Brennan, C.D. _____
Callahan _____
Casper _____
Conrad _____
Felt _____
Gale _____
Rosen _____
Tavel _____
Walters _____
Soyars _____
Tele. Room _____
Holmes _____
Gandy _____



MAIL ROOM ☐ TELETYPE UNIT ☐

July 27, 1970

Mr. James H. Gale
Federal Bureau of Investigation
Washington, D. C.

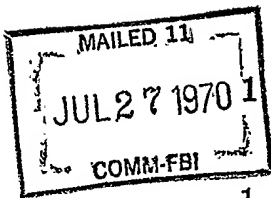
Dear Mr. Gale:

I am particularly pleased to commend, through you, those individuals in the Fugitive Section who contributed so substantially to the excellent record attained in fugitive accomplishments throughout the Bureau.

These employees performed their assigned duties with wholehearted enthusiasm, ingenuity and devotion. Please express my genuine appreciation to all concerned for their worthwhile services in this vital area of our work.

Sincerely yours,

J. Edgar Hoover



1 - Mr. Gale (Personal Attention)

A copy of this letter will be placed in the files of all participants.

1 - Mrs. [] (Sent Direct) b6

WM XEROX
AUG 20 1970

BLG By (29)

Based on Eddy-Gale memo 7-16-70 and addendum Special Investigative Division 7-17-70 re Fugitive Section, Statistical Accomplishments.

Tolson _____
Sullivan _____
Mohr _____
Bishop _____
Brennan, C.D. _____
Callahan _____
Casper _____
Conrad _____
Felt _____
Gale _____
Rosen _____
Tavel _____
Walters _____
Soyars _____
Tele. Room _____
Holmes _____
Gandy _____

MAIL ROOM ☐ TELETYPE UNIT ☐

Copies prepared and attached for placing in files of: (OVER)

Mr. James H. Gale
Washington, D. C.

Julian B. Engelstad



J. Russell Faulkner



Walter R. Happell

Judson J. Hodges



Maurice A. Kelliher



Lawrence S. Mohr

Marlin H. Moore

August B. Fipp

Henry S. Ursic



b6

October 14, 1970

PERSONAL

Mr. James H. Gale
Federal Bureau of Investigation
Washington, D. C.

Dear Mr. Gale:

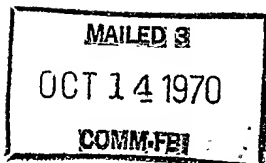
Recently information concerning an individual being sought under the Bureau's Top Ten Fugitive Program was furnished to Seat of Government by a field office. Although you were aware I was most interested in this particular matter, you failed to promptly keep me advised of the receipt of very pertinent photographs. Your explanation is unacceptable since it was your responsibility to keep me abreast of the developments in this case.

I am holding you personally responsible to insure I am immediately advised of significant information in such important matters.

Very truly yours,

J. Edgar Hoover

John Edgar Hoover
Director



- 1 - Movement
1 - Special Investigative Division Personnel File

Tolson _____
Sullivan _____
Mohr _____
Bishop _____
Brennan, C.D. _____
Callahan _____
Casper _____
Conrad _____
Felt _____
Gale _____
Rosen _____
Tavel _____
Walters _____
Soyars _____
Tele. Room _____
Holmes _____
Gandy _____

JJO:gms
(5)

Based on memo Gale to Sullivan, 10-14-70, JHG:ls.

MAIL ROOM ☐ TELETYPE UNIT ☐

October 2, 1970

Mr. James H. Gale
Federal Bureau of Investigation
Washington, D. C.

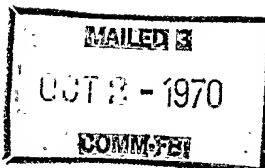
Dear Mr. Gale:

I am pleased to be able to commend, through you, the personnel in the Special Investigative Division who performed in such an admirable manner relative to a Special Inquiry matter of great interest.

Through the prompt and decisive efforts of these individuals, the FBI was able to fulfill its obligations in a most notable fashion within the given deadline. Please convey my gratitude to them for the excellence of their services.

Sincerely yours,

J. Edgar Hoover



1 - Mr. Gale (Personal Attention)
Re: Appointees to the Post Office Corporation

A copy of this letter will be placed in the personnel files of all participants who were not individually recognized.

1 - Mrs. [redacted] (Sent Direct)

b6

SMA (12)

Based on Cleveland-Gale memo of 9/28/70 re Commendation Matter, Employees Security and Special Inquiry Section, Special Investigative Division.

Tolson _____
Sullivan _____
Mohr _____
Bishop _____
Brennan, C.D. _____
Callahan _____
Casper _____
Conrad _____
Felt _____
Gale _____
Rosen _____
Tavel _____
Walters _____
Soyars _____
Tele. Room _____
Holmes _____
Gandy _____

MAIL ROOM ☐ TELETYPE UNIT ☐

Place a copy of this letter in the personnel files of: OVER

NOV 13 1970

Mr. James H. Gale
FBI - Washington, D. C.

[Redacted]

F. H. Freund, Jr.
Patrick J. Deery
O. Eugene Coleman

b6

[Redacted]

(Typed May 14, 1970)

MEMORANDUM TO ALL BUREAU OFFICIALS

RE: AVAILABILITY

After regular office hours, the Bureau Switchboard (Information Desk) should be fully informed as to your whereabouts and how best to reach you when not available at home.

When leaving the office at the end of the workday for some place other than your residence, it is not sufficient to leave word with a secretary, duty supervisor or other divisional employee. The Switchboard also must be informed in sufficient detail to reach you directly and without delay.

Very truly yours,

John Edgar Hoover
Director

FWW:bpr
(5)

NOTE: No manual change necessary. Simply a reminder that is appropriate at this time. On evening of 5-12, Director asked operator to reach Assistant Director Sullivan. Acting on only information she had, that he was at the Sheraton Park dining room, she found there are several dining rooms there, had him paged, at Director's instructions, unsuccessfully finally, called Domestic Intelligence Division night supervisor who furnished extension at Sheraton Park at which Sullivan was immediately reached.

Wilson ✓
DeLoach ✓
Walters ✓
Mohr ✓
Bishop ✓
Casper ✓
Callahan ✓
Conrad ✓
Felt ✓
Gale ✓
Rosen ✓
Sullivan ✓
Tavel ✓
Trotter ✓
Tele. Room ✓
Holmes ✓
Gandy ✓

MAIL ROOM ☐ TELETYPE UNIT ☐

ENCLOSURE



UNITED STATES DEPARTMENT OF JUSTICE
FEDERAL BUREAU OF INVESTIGATION

WASHINGTON, D.C. 20535

(Typed May 14, 1970)

Mr. Tolson	_____
Mr. Sullivan	_____
Mr. Mohr	_____
Mr. Bishop	_____
Mr. Brennan, C.D.	_____
Mr. Callahan	_____
Mr. Casper	_____
Mr. Conrad	_____
Mr. Felt	_____
Mr. Gale	_____
Mr. Rosen	_____
Mr. Tavel	_____
Mr. Walters	_____
Mr. Soyars	_____
Tele. Room	_____
Miss Holmes	_____
Miss Gandy	_____

MEMORANDUM TO ALL BUREAU OFFICIALS

RE: AVAILABILITY

After regular office hours, the Bureau Switchboard (Information Desk) should be fully informed as to your whereabouts and how best to reach you when not available at home.

When leaving the office at the end of the workday for some place other than your residence, it is not sufficient to leave word with a secretary, duty supervisor or other divisional employee. The Switchboard also must be informed in sufficient detail to reach you directly and without delay.

Very truly yours,

J. Edgar Hoover
John Edgar Hoover
Director

*Sent to all
Bv. 78
5/18/70
JH*

OUT 13 5 30 PM '70

RECEIVED

ENCLOSURE 66-02-1482
ENCLOSURE 66-02-1476

UNITED STATES GOVERNMENT

Memorandum

TO : MR. SULLIVAN *Shes*

FROM : J. H. GALE *JHG*

SUBJECT: PHYSICAL EXAMINATION
ASSISTANT DIRECTOR JAMES H. GALE *J*

DATE: November 23, 1970 *Shes*

Tolson ☒
Sullivan ☒
Mohr ☒
Bishop ☒
Brennan ☒
Callahan ☒
Conrad ☒
Felt ☒
Gale ☒
Rosen ☒
Tavel ☒
Walters ☒
Soyars ☒
Tele. Room ☒
Holmes ☒

Please be advised that I have been scheduled for some additional tests in connection with my annual physical examination on Wednesday morning, November 25, 1970, at 9:00 a.m. and I contemplate going to Bethesda Naval Hospital in connection with these tests at that time.

1 - Mr. Sullivan
1 - Mr. Callahan
1 - Mr. Gale

JHG:LS
(4)

DEC-143

67-137786-4/96
8 NOV 27 1970

WEL
93
3/1/71

DEC 2 1970
25

Mr. James H. Gale
FBI - Washington, D. C.

Howard W. Arendt

[REDACTED]

Richard B. Lavin

b6

[REDACTED]

Erkshell T. Zinn

October 20, 1970

Mr. James H. Gale
Federal Bureau of Investigation
Washington, D. C.

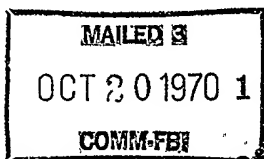
Dear Mr. Gale:

I am indeed pleased to commend, through you, those agents of the Special Investigative Division who performed in such a noteworthy manner relative to the investigations of numerous Departmental Applicant cases.

As a result of their perseverance and diligence, these men handled their responsibilities in an expeditious and thorough fashion and thereby enabled the Bureau to meet its obligations. Please convey to them my deep appreciation for a job well done.

Sincerely yours,

J. Edgar Hoover



REC-100

137761-497

DEC 1 1970

Mr. Gale (Personal Attention)

A copy of this letter will be placed in the personnel files of participating personnel who were not individually recognized.

1 - Mrs. [redacted] (Sent Direct)^{b6}

SMA (T1)

Based on Cleveland-Gale memo of 10/13/70 re Investigations of Judges Under the Omnibus Judgeship Bill and the District of Columbia Court Reform Act, Commendation Matter.

Tolson _____
Sullivan _____
Mohr _____
Bishop _____
Brennan, C.D. _____
Callahan _____
Casper _____
Conrad _____
Felt _____
Gale _____
Rosen _____
Tavel _____
Walters _____
Soyars _____
Tele. Room _____
Holmes _____

45 G.B. KEROX
DEC 7 1970

MAIL ROOM ☐ TELETYPE UNIT ☐

Copies prepared & attached for placing in the files of: OVER

REPORT OF MEDICAL EXAMINATION

FBI

1. LAST NAME—FIRST NAME—MIDDLE NAME Gale, James Henry			2. GRADE AND COMPONENT OR POSITION Assistant Director		3. IDENTIFICATION NO. 5-66-63	
4. HOME ADDRESS (Number, street or RFD, city or town, State and ZIP Code)			5. PURPOSE OF EXAMINATION Annual		6. DATE OF EXAMINATION 11-5-70	
7. SEX M	8. RACE	9. TOTAL YEARS GOVERNMENT SERVICE MILITARY _____ CIVILIAN _____		10. AGENCY	11. ORGANIZATION UNIT	
12. DATE OF BIRTH 9-28-21		13. PLACE OF BIRTH Ohio		14. NAME, RELATIONSHIP, AND ADDRESS OF NEXT OF KIN		
15. EXAMINING FACILITY OR EXAMINER, AND ADDRESS NNMC				16. OTHER INFORMATION		
17. RATING OR SPECIALTY				TIME IN THIS CAPACITY (Total)		LAST SIX MONTHS

CLINICAL EVALUATION		
NOR-MAL	(Check each item in appropriate column; enter "NE" if not evaluated.)	ABNOR-MAL
<input checked="" type="checkbox"/>	18. HEAD, FACE, NECK AND SCALP	
<input checked="" type="checkbox"/>	19. NOSE	
<input checked="" type="checkbox"/>	20. SINUSES	
<input checked="" type="checkbox"/>	21. MOUTH AND THROAT	
<input checked="" type="checkbox"/>	22. EARS—GENERAL (Int. & ext. canals) (Auditory acuity under items 70 and 71)	
<input checked="" type="checkbox"/>	23. DRUMS (Perforation)	
<input checked="" type="checkbox"/>	24. EYES—GENERAL (Visual acuity and refraction under items 69, 60 and 67)	
<input checked="" type="checkbox"/>	25. OPHTHALMOSCOPIC	
<input checked="" type="checkbox"/>	26. PUPILS (Equality and reaction)	
<input checked="" type="checkbox"/>	27. OCULAR MOTILITY (Associated parallel movements, nystagmus)	
<input checked="" type="checkbox"/>	28. LUNGS AND CHEST (Include breasts)	
<input checked="" type="checkbox"/>	29. HEART (Thrust, size, rhythm, sounds)	
<input checked="" type="checkbox"/>	30. VASCULAR SYSTEM (Varicosities, etc.)	
<input checked="" type="checkbox"/>	31. ABDOMEN AND VISCERA (Include hernia)	
<input checked="" type="checkbox"/>	32. ANUS AND RECTUM (Hemorrhoids, fistulae) (Prostate, if indicated)	
<input checked="" type="checkbox"/>	33. ENDOCRINE SYSTEM	
<input checked="" type="checkbox"/>	34. G-U SYSTEM	
<input checked="" type="checkbox"/>	35. UPPER EXTREMITIES (Strength, range of motion)	
<input checked="" type="checkbox"/>	36. FEET	
<input checked="" type="checkbox"/>	37. LOWER EXTREMITIES (Except feet) (Strength, range of motion)	
<input checked="" type="checkbox"/>	38. SPINE, OTHER MUSCULOSKELETAL	
<input checked="" type="checkbox"/>	39. IDENTIFYING BODY MARKS, SCARS, TATTOOS	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	40. SKIN, LYMPHATICS	
<input checked="" type="checkbox"/>	41. NEUROLOGIC (Equilibrium tests under item 72)	
<input checked="" type="checkbox"/>	42. PSYCHIATRIC (Specify any personality deviation)	
<input checked="" type="checkbox"/>	43. PELVIC (Females only) (Check how done)	
<input type="checkbox"/> VAGINAL <input type="checkbox"/> RECTAL		

NOTES. (Describe every abnormality in detail. Enter pertinent item number before each comment. Continue in item 73 and use additional sheets if necessary.)

#39-VSULA

RESULTS

15.0 HGB GMS
100ML
45 HCT %
8.0 WBC $\times 10^3$

NEUT % D
BAND % F
LYMPH % E
EOS % R
BASO % N
MONOS % L

PLATELET $\times 10^3$

RESULTS

145 NAH
4.6 K-H
109 CL
24 CO
7.3 TP
4.5 ALB
8.8 CA+31
11 ALK. PHOS
19 BUN
100 GLU
30 SGOT
285 CHOL

Creatinine 1.9
Uric Acid 5.7

11-25-70
BUN 20
Creatinine 1.1
Micro. Ess-Neg
Urinalysis Alb. --Neg
1.020 S/G Sugar

67-131706-498
(Continue in item 73)

44. DENTAL (Place appropriate symbols, shown in examples, above or below number of upper and lower teeth.)														REMARKS AND ADDITIONAL DENTAL DEFECTS AND DISEASES																																																																					
<table border="0"><tr><td>0 1 2 3 Restorable 32 31 30 teeth</td><td>1 2 3 Non- 32 31 30 restorable teeth</td><td>1 2 3 Missing 32 31 30 teeth</td><td>1 2 3 Replaced 32 31 30 by dentures</td><td>1 2 3 Fixed 32 31 30 Partial dentures</td></tr></table>														0 1 2 3 Restorable 32 31 30 teeth	1 2 3 Non- 32 31 30 restorable teeth	1 2 3 Missing 32 31 30 teeth	1 2 3 Replaced 32 31 30 by dentures	1 2 3 Fixed 32 31 30 Partial dentures	Exam-Type 3 Class 1 NCD																																																																
0 1 2 3 Restorable 32 31 30 teeth	1 2 3 Non- 32 31 30 restorable teeth	1 2 3 Missing 32 31 30 teeth	1 2 3 Replaced 32 31 30 by dentures	1 2 3 Fixed 32 31 30 Partial dentures																																																																															
<table border="0"><tr><td>R I G H T</td><td>1</td><td>2</td><td>3</td><td>4</td><td>5</td><td>6</td><td>7</td><td>8</td><td>9</td><td>10</td><td>11</td><td>12</td><td>13</td><td>14</td><td>15</td><td>16</td><td>17</td><td>18</td><td>19</td><td>20</td><td>21</td><td>22</td><td>23</td><td>24</td><td>25</td><td>26</td><td>27</td><td>28</td><td>29</td><td>30</td><td>31</td><td>32</td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>														R I G H T	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32																																				93	
R I G H T	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32																																																			

45. URINALYSIS: A. SPECIFIC GRAVITY 1.022				46. CHEST X-RAY (Place, date, film number and result) 300-2-70 49725 -Neg			
B. ALBUMIN Neg				D. MICROSCOPIC 1-3 WBC			
C. SUGAR Neg				48. EKG WNL NSCS 12-18-69			
47. SEROLOGY (Specify test used and result) Neg				49. BLOOD TYPE AND RH FACTOR			
50. OTHER TESTS							

MEASUREMENTS AND OTHER FINDINGS

51. HEIGHT 74"		52. WEIGHT 190		53. COLOR HAIR Brown		54. COLOR EYES Blue		55. BUILD: <input type="checkbox"/> SLENDER <input type="checkbox"/> MEDIUM <input type="checkbox"/> HEAVY <input type="checkbox"/> OBESE				56. TEMPERATURE																														
57. BLOOD PRESSURE (Arm at heart level)								58. PULSE (Arm at heart level)																																		
A. SITTING SYS. 124 DIAS. 80		B. RECUMBENT SYS. DIAS.		C. STANDING (3 min.) SYS. DIAS.		A. SITTING 72		B. AFTER EXERCISE		C. 2 MIN. AFTER		D. RECUMBENT		E. AFTER STANDING 3 MIN.																												
59. DISTANT VISION				60. REFRACTION				61. NEAR VISION																																		
RIGHT 20/ 15 CORR. TO 20/				BY +1.50 S.				CX				J-5 CORR. TO J-1 BY																														
LEFT 20/ 15 CORR. TO 20/				BY +1.50 S. -0.25				CX 170				J-5 CORR. TO J-1 BY																														
62. HETEROPHORIA (Specify distance)																																										
ES°		EX°		R. H.		L. H.		PRISM DIV.		PRISM CONV. CT		PD																														
63. ACCOMMODATION				64. COLOR VISION (Test used and result)				65. DEPTH PERCEPTION (Test used and score)				UNCORRECTED																														
RIGHT LEFT				Fransworth 9/9								CORRECTED																														
66. FIELD OF VISION Normal O U				67. NIGHT VISION (Test used and score)				68. RED LENS TEST				69. BINOCULAR TENSION os 7 c 5.5 = 12.2																														
70. HEARING				71. AUDIOMETER								72. PSYCHOLOGICAL AND PSYCHOMOTOR (Tests used and score)																														
RIGHT WV /15 SV /15				<table border="1"> <tr> <td></td> <td>250 256</td> <td>500 512</td> <td>1000 1024</td> <td>2000 2048</td> <td>3000 2896</td> <td>4000 4096</td> <td>6000 6144</td> <td>8000 8192</td> </tr> <tr> <td>RIGHT</td> <td>10</td> <td>15</td> <td>15</td> <td>10</td> <td>50</td> <td>35</td> <td>45</td> <td>65</td> </tr> <tr> <td>LEFT</td> <td>20</td> <td>25</td> <td>10</td> <td>35</td> <td>65</td> <td>55</td> <td>65</td> <td>70</td> </tr> </table>									250 256	500 512	1000 1024	2000 2048	3000 2896	4000 4096	6000 6144	8000 8192	RIGHT	10	15	15	10	50	35	45	65	LEFT	20	25	10	35	65	55	65	70				
	250 256	500 512	1000 1024	2000 2048	3000 2896	4000 4096	6000 6144	8000 8192																																		
RIGHT	10	15	15	10	50	35	45	65																																		
LEFT	20	25	10	35	65	55	65	70																																		

73. NOTES (Continued) AND SIGNIFICANT OR INTERVAL HISTORY

71 No problems C conversational speech. Hearing loss S progression since 1969 audiogram.

(Use additional sheets if necessary)

74. SUMMARY OF DEFECTS AND DIAGNOSES (List diagnoses with item numbers)

#71 High frequency hearing loss, a. u.

75. RECOMMENDATIONS—FURTHER SPECIALIST EXAMINATIONS INDICATED (Specify)

76. A. PHYSICAL PROFILE						
P	U	L	H	E	S	
B. PHYSICAL CATEGORY						
A	B	C	E			

77. EXAMINEE (Check)

A. ☒ IS QUALIFIED FOR
B. ☐ IS NOT QUALIFIED FOR

78. IF NOT QUALIFIED, LIST DISQUALIFYING DEFECTS BY ITEM NUMBER

79. TYPED OR PRINTED NAME OF PHYSICIAN

SIG

80. TYPED OR PRINTED NAME OF PHYSICIAN

SIG

81. TYPED OR PRINTED NAME OF DENTIST OR PHYSICIAN (Indicate which)

SIGNATURE

82. TYPED OR PRINTED NAME OF DENTIST OR PHYSICIAN (Indicate which)

SIGNATURE

1742

RECEIPT FOR GOVERNMENT PROPERTY
FEDERAL BUREAU OF INVESTIGATION
UNITED STATES DEPARTMENT OF JUSTICE

Date

2/1/71

I certify that I have ☒ received ☐ returned the following Government property for official use:

U. S. D. J. GARAGE PARKING PERMIT (DECAL) SPACE #11

RETURNED

U. S. D. J. GARAGE PARKING PERMIT #11

READ

The Government property which you hereby acknowledge is charged to you and you are responsible for taking care of it and returning it when its use has been completed.

DO NOT MARK OR WRITE ON IT OR MUTILATE IT IN ANY WAY.

FILE

37 DRK

Very truly yours,

(Signature)

James H. Gale

(Typed name)

JAMES H. GALE

9 FEB 10 1971

60

**Attachment to Standard Form 88, Report of Medical Examination
For Information and Guidance of Medical Examiner**

Name of Examinee	Gale	James	Henry
(Type or print)	Last	First	Middle

The following portions of the attached examination report form need not be completed:

2	9	62	69
3	11	65	72
4	14	67	76
8	17	68	

45, 46 and 47. Required for all Special Agent applicants but not for any other applicant unless the examining physician deems one, two or all three of the examinations necessary. 45, 46 and 47 are required in examination of any current employee.

48. Not required unless examinee is over 35 years of age or examination indicates such is desirable.

49. Is necessary unless facilities for affording same are not readily available.

71. Audiometer examinations should be afforded whenever possible for all Special Agent applicants and Special Agents. Applicants for the Special Agent position will not be accepted if the hearing loss exceeds a 15 decibel average in either ear in the conversational speech range (500, 1000, 2000 cycles).

For All Examinees, Whether Clerical or Special Agent Applicants or Employees:

The medical examiner should answer the following question:

Examinee ☒ is ☐ is not qualified for strenuous physical exertion.

To be Answered in the Case of All Male Employees and Male Applicants:

1. Does examinee have any defects restricting or prohibiting his participation in defensive tactics and dangerous assignments which might entail the practical use of firearms?

☒ No ☐ Yes If "yes" please specify defects. _____

2. Does examinee have any defects prohibiting safe operation of motor vehicles?

☒ No ☐ Yes If "yes" please specify defects. _____

3. For safe driving of motor vehicles, Civil Service Commission requires distant vision must test at least 20/40 in one eye and 20/100 in the other, corrected or uncorrected. Should examinee wear corrective glasses while operating a motor vehicle? ☐ Yes ☒ No

If recommendation is based on a factor other than above standard, indicate basis _____

Copy made

9-7-82

67-13778-1

Desirable Weight Ranges for Males

Height	Small Frame	Medium Frame	Large Frame
5'4"	117 - 125	123 - 135	131 - 148
5'5"	120 - 129	126 - 139	134 - 152
5'6"	124 - 133	130 - 143	138 - 157
5'7"	128 - 137	134 - 148	143 - 162
5'8"	132 - 141	138 - 152	147 - 166
5'9"	136 - 146	142 - 156	151 - 170
5'10"	140 - 150	146 - 161	155 - 175
5'11"	144 - 154	150 - 166	160 - 180
6'	148 - 158	154 - 171	164 - 185
6'1"	152 - 163	158 - 176	169 - 190
6'2"	156 - 167	163 - 181	174 - 195
6'3"	160 - 171	168 - 186	178 - 200
6'4"	169 - 180	178 - 196	188 - 210
6'5"	174 - 185	182 - 202	192 - 216

4. Examinee's frame is ☐ small ☐ medium ☒ large

5. Considering above weight table, the examinee's frame, and other individual physical characteristics, I consider his present weight ☒ Satisfactory ☐ Excessive ☐ Deficient

6. Under proper medical supervision, employee should ☐ lose _____ pounds

☐ gain _____ pounds

Remarks: _____



5 Nov 70

Date

b6

December 29, 1970

PERSONAL

Mr. James H. Gale
Federal Bureau of Investigation
Washington, D. C.

Dear Gale:

I am certainly pleased to be able to have this opportunity to commend you for the excellence of your performance relative to nationwide gambling raids conducted by the FBI on December 12, 1970.

The able direction and supervision that you afforded to this vitally important matter of tremendous magnitude did much to insure its success. You may be assured that I am indeed appreciative.

Sincerely yours,
J. Edgar Hoover

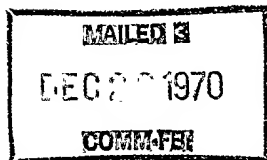
1 - Mrs. [redacted] (Sent Direct) b6

RHC:jic
(4)

REC-134

137781-499
3 DEC 30 1970

Based on Gale-Sullivan memo 12/21/70 and addendum
Administrative Division 12/23/70 re Nationwide Gambling
Raids, December 12, 1970.



Tolson _____
Sullivan _____
Mohr _____
Bishop _____
Brennan, C.D. _____
Callahan _____
Casper _____
Conrad _____
Felt _____
Gale _____
Rosen _____
Sullivan _____
Tavel _____
Trotter _____
Tele. Room _____
Holmes _____
Gandy _____

MAIL ROOM ☐ TELETYPE UNIT ☐

December 7, 1970

PERSONAL ATTENTION

Mr. James H. Gale
Federal Bureau of Investigation
Washington, D. C.

Dear Mr. Gale:

After reviewing the results of the inspection of the Special Investigative Division, I have approved the following ratings for your operations: Specific Division Operations, Administrative Operations and Contacts - Excellent; Physical Condition and Maintenance and Personnel Matters - Very Good.

The increases in statistical accomplishments recorded by your Division during Fiscal Year 1970 were impressive and the substantial gains reported thus far in Fiscal Year 1971 are very encouraging. I was pleased to note that convictions in gambling investigations have risen sharply. With the recently approved new legislation governing gambling matters, these increases should continue if we aggressively accept the challenges presented by these broad statutes. It is your responsibility to see that this is done and you should continue to press the investigation of these violations throughout the field, whether or not organized crime exists in the territory of a particular office.

Your member informant coverage of La Cosa Nostra has again increased and your top-echelon informants furnish information on all "families" in that organization. Insure that you continue to press for member informant coverage and that you continue to develop strong prosecutable cases against the leadership of every La Cosa Nostra "family." The Inspector's suggestion to strengthen the top-echelon informant program through efforts to improve the quality of the targets should enhance the overall development of your program.

The marked increases in the number of fugitives apprehended last fiscal year and thus far in the current year are noteworthy. Continue

- 1 - Mr. Callahan (Attention Mr. J. B. Adams) (With Enclosure)
- 1 - Inspection File Special Investigative Division
- 1 - Personnel File James H. Gale

ESM:bhg (6)

See Note Page 2.

Mr. James H. Gale

to afford careful attention to the important applicant investigations supervised by your Division. The increased accomplishments from the Criminal Informant Program demonstrate what can be done. Press for more productive live informants. Exert strong supervisory pressure on this area of our operations.

The continued low rate of field delinquency in cases handled in your Division reflects favorably on your staff as does the fact that no substantive errors were detected in the files reviewed during the inspection. Be alert to the further use of automatic data processing and the National Crime Information Center as suggested by the Inspector, particularly in the handling of fugitive matters.

Continue to emphasize security of your space particularly since you are on the ground level of the Justice Building. Afford careful attention to the Inspector's instructions to lessen the potential vulnerability of attack by violence-oriented groups or individuals. Your space, though well maintained, is barely adequate for the needs of your Division. Continue to be alert for ways of conserving space.

The absence of Division and stenographic delinquencies and the tight controls on stops on incoming mail are indicative of close supervision afforded by you and your staff. Insure this continues.

The contact program of your Division was found to be effective and diversified. Continue to follow closely those legislative matters which affect the work of your Division.

You and your Number One Man should carefully review the findings in the inspection report and work papers left with you. Advise the Inspection Division as soon as possible of corrective action taken by you.

Sincerely yours,

John Edgar Hoover
Director

NOTE: Based on memo W. M. Felt to Mr. Tolson captioned "Inspection - Special Investigative Division, Inspector E. S. Miller, 11/6-25/70," dated 12/7/70, ESM:bhg.

MR. TOLSON

December 7, 1970

W. M. FELT

INSPECTION - SPECIAL INVESTIGATIVE DIVISION
INSPECTOR E. S. MILLER
11/6 - 25/70

SUMMARY

Officials: Assistant Director James H. Gale since 12/15/64. Number One Man Thomas J. McAndrews since 4/27/68 (retiring effective 12/31/70). William V. Cleveland, designated (12/1/70) Number One Man, to replace McAndrews. Last inspection: 9/5 - 19/69.

Physical Condition and Maintenance - Very Good (Last Inspection - Excellent). Division occupies space on first and seventh floors of Justice Building. Crowded but adequate. Well maintained and housekeeping delinquencies minimal. Security of space being stressed; however, instructions given to explore methods to provide even greater security particularly in first floor space against violence-prone elements. No vehicles assigned.

Specific Division Operations - Excellent (Last Inspection - Very Good). Division currently supervising 59,430 pending office of origin matters - up from 57,467 at last inspection. Increase primarily in Organized Crime matters. Field delinquency averaged 1.6% in all matters supervised (low) and no single classification reached 7% in any month. No substantive errors detected in files reviewed. Convictions in classifications supervised up 3.3% in Fiscal Year (FY) 1970 over FY 1969 and up 13.0% in first 4 months FY 1971 over similar period last year. Over 30,000 fugitives located in FY 1970 - up 18% over prior year and new all-time high. Fugitives located up 21% first 4 months FY 1971. All field offices surpassed previous year record of fugitives located in FY 1970 and trend continuing current FY. Identification Orders, Wanted Flyers and Check Circulars effectively utilized on selective basis. 37 member informants (36 last inspection) provide coverage of 16 of 27 La Cosa Nostra (LCN) "families." Instructed to continue emphasis on such coverage to include all "families" even though 334 top-echelon informants (up from 294) and 1044 targets (up from 823) provide coverage all LCN "families." 6 additional LCN family bosses convicted since last inspection. Gambling convictions up 17.6% in FY 1970 and up 82.0% first 4 months FY 1971 over similar period last year. 4638 criminal informants - up from 4415 last inspection; 8290 potential criminal

Enclosure

- 1 - Mr. Callahan (Attention Mr. J. B. Adams) (Sent Separately)
- 1 - Personnel Files James H. Gale and William V. Cleveland

ESM:bhg (6)

CONTINUED - OVER

DUPLICATE YELLOW

Memorandum to Mr. Tolson

Re: Inspection - Special Investigative Division

informants - up from 7884; productivity substantially increased. Suggestions made for further streamlining fugitive index when computer programming capable of implementing. Division following closely.

Administrative Operations - Excellent (Last Inspection - Excellent). No delinquency in Division since last inspection. Supervisory responsibilities equitably shared. Instructions given to consolidate two units where responsibilities related (Assistant Director agreed); otherwise, supervisory structure well organized. No stops on incoming mail and tightly controlled when utilized. Supervisors alert to delays and improper submission of communications from field. Records Management Program in Division effective. Handling of Selective Service cases streamlined. No stenographic delinquency. Tickler systems effective and Division alert to utilization of automatic data processing. Suggestion made by Inspector to streamline dissemination of certain Organized Crime matters. Odd-hour shifts justified - clerical employees afforded close supervision.

Personnel Matters - Very Good (Last Inspection - Very Good). Authorized personnel complement of 63 Agents and 138 clerks at beginning of inspection represents increase of one Agent and one clerk since last inspection. During inspection addition of two Agents to complement requested -- justified (approved separately). No Agents overweight or on probation; one on limited duty - justified. One Agent misplaced or lost badge and item not available for property check (handled separately). 9 employee suggestions adopted of 11 submitted. No work-related injuries. Morale appears high.

Contacts - Excellent (Last Inspection - Excellent). 194 contacts provide substantial diversified coverage in areas of value to Division and Bureau. Legislative matters related to work responsibilities closely followed. Substantial benefits from liaison programs. Excellent speech material supplied Crime Records Division, Bureau officials and field.

RECOMMENDATIONS

1. Assistant Director James H. Gale, aged 49, GS-18 at \$35,505, veteran, not on probation, in charge of Division since 12/15/64. Outstanding appearance; experienced, capable administrator. Gale is loyal and enthusiastic; provides firm leadership and has excellent knowledge of Bureau's policies and procedures. Attached for approval is letter to Mr. Gale summarizing inspection findings.

DUPLICATE YELLOW

Memorandum to Mr. Tolson

Re: Inspection - Special Investigative Division

2. William V. Cleveland, aged 54, GS-16 at \$33,627, nonveteran, not on probation. Designated Number One Man 12/1/70, to replace Thomas J. McAndrews - retired - effective 12/31/70. Cleveland makes an excellent appearance. Has thorough knowledge of Bureau's and Division's work. Attached letter to Assistant Director Gale will advise Cleveland of inspection findings.

3. Recommendations regarding other personnel handled separately.

UNITED STATES GOVERNMENT

Memorandum

TO : The Director

DATE: 11/30/70

FROM : N. P. Callahan *mpc*

SUBJECT: LOCATION OF OFFICIALS

Assistant Directors

☒ Felt, W. M.
☒ Brennan, C. D.
☒ Rosen, A.
☒ Casper, J. J.
☒ Gale, J. H.
☒ Tavel, W. S.

Annual leave (Los Angeles)
Washington (From annual leave)
Washington (From annual leave)
Washington (From annual leave)
Washington (From annual leave)
Washington (From annual leave)

Inspectors

☒ Franck, R. R.
☒ Baker, J. V.
☒ Leavitt, T. W.
☒ Bowers, D. W.
☒ Dalbey, D. J.
☒ Suttler, B. M.
☒ Dunphy, J. P.

En route Paris (Inspection)
New Orleans (Inspection)
Washington (From Ottawa)
Washington (From annual leave)
Washington (From annual leave)
Washington (From annual leave)
Washington (From annual leave)

Inspection Division Staff

☒ Campbell, W. G.
☒ Thompson, F. D.

Atlanta (Inspection)
Atlanta (Inspection)
San Antonio (Inspection)

Photographer

67-276576-407

REC-131

From Washington (From annual leave)

DEC 9 1970

- 1 - Mr. Tolson
- 1 - Mr. Mohr
- 1 - Mr. Sullivan
- 1 - Mr. Bishop
- 1 - Mr. Soyars
- 1 - Mr. Callahan
- 1 - Miss Holmes
- 1 - Mr. Davidson
- 1 - Mr. Walsh
- 1 - Mr. Clark

MC XEROX

DEC 17 1970

45

Handwritten signatures and initials:
Tolson
Sullivan
Mohr
Bishop
Callahan
Gale
Rosen
Tavel
Walsh
Soyars
Tele. Room
Holmes
Gandy

Handwritten note:
I am glad to note all
but the Asst Director
have returned particularly
in view of crisis facing the
past few weeks.

Handwritten signatures:
H
J. P. Callahan
J. P. Callahan

Stamp:
9 DEC 4
PERS. REC. UNIT

JAMES H. GALE

March 17, 1971

Mr. John Edgar Hoover
Director
Federal Bureau of Investigation
Washington, D. C.

Mr. Tolson	_____
Mr. Sullivan	_____
Mr. Mohr	_____
Mr. Bishop	_____
Mr. Brennan	CD_____
Mr. Callahan	_____
Mr. Casper	_____
Mr. Conrad	_____
Mr. Dalbey	_____
Mr. Felt	_____
Mr. Gale	_____
Mr. Rosen	_____
Mr. Tavel	_____
Mr. Walters	_____
Mr. S. yars	_____
Tele. Room	_____
Miss Holmes	_____
Miss Gandy	_____

Dear Mr. Hoover:

It is my understanding that your testimony before the House Subcommittee on Appropriations was very warmly received by the Committee and was handled by you in an outstanding fashion.

Please accept my heartiest congratulations and deepest appreciation for the tremendous contribution you have made for all of us before the Committee.

I know that if it were not for the terrific job before the Committee, that our appropriations would not be sufficient to carry out our responsibilities and I am most grateful for your inspiring leadership.

With cordial good wishes, I am

Sincerely,

James H. Gale
James H. Gale

MAR 17 1971

REC-135

67-137786-500
Searched _____ Numbered _____
8 MAR 25 1971 72

UNITED STATES GOVERNMENT

Memorandum

Tolson _____
Sullivan _____
Mohr _____
Bishop _____
Brennan, C.D. _____
Callahan _____
Casper _____
Conrad _____
Dalbey _____
Felt _____
Gale _____
Rosen _____
Tavel _____
Walters _____
Soyars _____
Tele. Room _____
Holmes _____
Gandy _____

TO : Mr. Tolson

DATE: 4/5/71

FROM : Mr. Mohr

SUBJECT: JAMES H. GALE
Assistant Director
Special Investigative Division
OUTSTANDING ANNUAL PERFORMANCE RATING

In the event the Director desires to approve, there is attached the annual performance rating in duplicate covering Mr. Gale's services from April 1, 1970, to March 31, 1971, in which he is rated Outstanding. Mr. Sullivan has signed this rating as the Rating Official.

In the event this rating is approved, I respectfully request that you sign both the original and the copy as the Reviewing Official and that the Director sign both the original and the copy as the Approving Official. Additionally, in the event of approval, there is attached a letter advising Mr. Gale of this action together with the Director's approval of a \$500 cash award.

RECOMMENDATION:

After you have signed the attached Outstanding rating as Reviewing Official, if the Director desires to approve it, the original and copy should be signed by him as Approving Official. Additionally, in the event the Director approves, attached letter to Mr. Gale advises of approval of the Outstanding rating together with approval of a \$500 award.

ADDENDUM:

Censured 4/27/70 for his responsibility in subordinates having failed to make a determination concerning listing of certain cases incident to possible reimbursement concerning applicant-type cases resulting in a misunderstanding. Censured 10/14/70 for failure to promptly keep Director advised of receipt of very pertinent photographs concerning an individual being sought under Bureau's Top Ten Fugitive Enclosures Program 1970 rating Outstanding.

LDH:sma
(2)

6 APR 8 1971

REC-35

March 17, 1971

Dear Gale:

Thank you for your letter concerning my appearance before the House Subcommittee on Appropriations today. I appreciate your thoughtfulness.

Sincerely,

J. E. H.

Mr. James H. Gale
Federal Bureau of Investigation
Washington, D. C.

JEH:rm (3)

✓
Tolson _____
Sullivan _____
Mohr _____
Bishop _____
Brennan, C.D. _____
Callahan _____
Casper _____
Conrad _____
Dalbey _____
Felt _____
Gale _____
Rosen _____
Tavel _____
Walters _____
Soyars _____
Tele. Room _____
Holmes _____
Gandy _____

83 MAR 30 1971

MAIL ROOM ☐ TELETYPE UNIT ☐

SENT FROM D. O.	
TIME	5:15 PM
DATE	3-17-71
BY	AGB

JAMES H. GALE

Mr. Tolson ✓
Mr. Sullivan ✓
Mr. Mohr ✓
Mr. Bishop ✓
Mr. Casper ✓
Mr. Conrad ✓
Mr. Felt ✓
Mr. Gale ✓
Mr. Rosen ✓
Mr. Tavel ✓
Mr. Walters ✓
Mr. Soyars ✓
Tele. Room ✓
Miss Holmes ✓
Miss Gandy ✓

April 7, 1971

Mr. John Edgar Hoover
Director
Federal Bureau of Investigation
Washington, D. C.

Dear Mr. Hoover:

I want to take this opportunity to express my sincerest appreciation and gratitude for the Outstanding performance rating and incentive award which I have just received.

I was certainly delighted to receive this recognition from you and I want you to know that I will do everything in my power to merit your continued confidence and trust.

With cordial good wishes, I am

Sincerely,

James H. Gale
James H. Gale

REC-137

137786-502
1 APR 9 1971

10 APR 13 1971

3/91

April 5, 1971

PERSONAL

Mr. James H. Gale
Federal Bureau of Investigation
Washington, D. C.

Dear Gale:

It is a pleasure to advise you that your services for the period April 1, 1970, to March 31, 1971, have merited an Outstanding rating. A copy of this rating is enclosed, which you may retain.

I am also pleased to advise that I have approved an incentive award of \$500.00 for you in recognition of your valuable performance during the past year and a check, which represents this award, will be sent to you at a later date. I do not want the occasion to pass without expressing my appreciation for your fine assistance in carrying out the Bureau's heavy responsibilities.

Sincerely,

J. Edgar Hoover

Enclosure

1 - Payroll Distribution (Sent Direct)

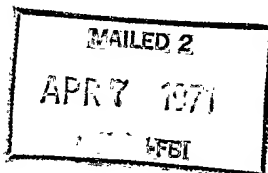
1 - Mrs. [redacted] (Sent Direct) b6

JAB:sma (5) Award # 1476-71

Based on memo Mohr-Tolson dated 4/5/71, LDH:sma.

Salutation per file.

Tolson _____
Sullivan _____
Mohr _____
Bishop _____
Brennan, C.D. _____
Callahan _____
Casper _____
Conrad _____
Dalbey _____
Felt _____
Gale _____
Rosen _____
Tavel _____
Walters _____
Boyers _____
Tele. Room _____
Holmes _____
Gandy _____



MAIL ROOM ☐ TELETYPE UNIT ☐

JAMES H. GALE

April 5, 1971

Mr. John Edgar Hoover
Director
Federal Bureau of Investigation
Washington, D. C.

Mr. Tolson	_____
Mr. Sullivan	_____
Mr. Mohr	_____
Mr. Bishop	_____
Mr. Brennan	CD _____
Mr. Callahan	_____
Mr. Casper	_____
Mr. Conrad	_____
Mr. Dalbey	_____
Mr. Felt	_____
Mr. Gale	_____
Mr. Rosen	_____
Mr. Tavel	_____
Mr. Walters	_____
Mr. Soyars	_____
Tele. Room	_____
Miss Holmes	_____
Miss Gandy	_____

Dear Mr. Hoover:

I have just finished reading the vicious and scurrilous articles which appeared in this week's editions of "Newsweek" and "Life" and this morning's "Washington Post." Needless to say, the way they have attacked you and the Bureau has absolutely made me very sick at heart.

The writers have twisted the truth like it has never been twisted before, employed innuendo to its utmost and have prostituted themselves to make a few dollars by creating sensational stories. It is yellow journalism at its worst. The dupes of the left are obviously trying to sell out a great man and a great organization for their own nefarious purposes.

Over the years I have witnessed similar attacks as far back as the early forties. We have always weathered such storms before because of your great courage and inspirational leadership and I know that we will weather this one and have the benefit of your wise leadership for many years to come.

Mr. Hoover, I want you to know that you have my full and complete support during this trying period and I will do anything possible to be of assistance to you.

REC-145

67-137786-503

APR 14 1971

With cordial good wishes, I am

Sincerely,

James H. Gale
James H. Gale

THRE

ack. 4/7/71
4/17/71
APR 20 1971
49

APR 5 1971

EXP. PROC.

April 7, 1971

Dear Gale:

It meant a great deal to me to receive your letter of April 5th setting forth your feelings in regard to the recent articles in the Washington Post, Life Magazine, and Newsweek. Since we know the character of this pack of jackals spewing their venom, I feel certain that we shall weather this storm presently swirling around us, and the best way is for each of us to simply continue to do our job in the very best way possible and adhere to the right principles. Thus, our record will speak for itself.

My sincerest thanks and deepest appreciation for your expression of support.

Sincerely,

J. H.

157722-504

APR 11 1971

Mr. James H. Gale
Federal Bureau of Investigation
Washington, D. C.

SENT FROM D. O.
TIME 5:10 PM
DATE 4-8-71
BY ETC

✓ ✓
Tolson _____
Sullivan _____
Mohr _____
Bishop _____
Brennan, C.D. _____
Callahan _____
Casper _____
Conrad _____
Dalbey _____
Felt _____
Gale _____
Rosen _____
Tavel _____
Walters _____
Soyars _____
Tele. Room _____
Holmes _____
Gandy _____

JEH:edm (3)

28114 49
APR 20 1971

MAIL ROOM ☐

TELETYPE UNIT ☐

FEDERAL BUREAU OF INVESTIGATION
UNITED STATES DEPARTMENT OF JUSTICE

REPORT OF PERFORMANCE RATING

Name of Employee: JAMES H. GALEWhere Assigned: SPECIAL INVESTIGATIVE
(Division) (Section, Unit)Official Position Title and Grade: ASSISTANT DIRECTORRating Period: from APRIL 1, 1970 to MARCH 31, 1971ADJECTIVE RATING: OUTSTANDING Employee's
Outstanding, Excellent, Satisfactory, Unsatisfactory InitialsRated by: William Sullivan Assistant to the 4/1/71
Signature Title DateReviewed by: Clyde A. Tolson Associate Director 4/1/71
Signature Title DateRating Approved by: J. Edgar Hoover Director 4/1/71
Signature Title Date

TYPE OF REPORT

☒ Official
☒ Annual☐ Administrative
☐ 60-Day
☐ 90-Day
☐ Transfer
☐ Separation from Service
☐ Special

REC-145

13 7786-505

9 APR 19 1971

72

1 APR 1971

THREE

**JAMES H. GALE
ASSISTANT DIRECTOR
SPECIAL INVESTIGATIVE DIVISION**

The exemplary fashion in which Mr. Gale has performed during the period of April 1, 1970, through March 31, 1971, has certainly earned this Outstanding rating for him.

Over the course of a long and distinguished career, Mr. Gale has gained a wealth of knowledge concerning the operations of the FBI, and he is able to successfully implement this knowledge through the use of superior intelligence, judgment and common sense. He has amply demonstrated over the years his willingness to assume increasingly important responsibilities, and he has fulfilled each assignment in a most laudable way.

As Assistant Director of the Special Investigative Division, he is responsible for initiating and directing investigative activities of a criminal, security, and applicant nature, maintaining centralized control over such matters in all field offices. He approaches his tasks enthusiastically, and, although faced daily with a voluminous amount of work which requires minute attention to detail and which obligates him to work for long periods of time without respite, Mr. Gale is able to complete his work promptly and properly, never experiencing a lessening of efficiency or loss of composure due to the tremendous pressures to which he is subjected. Perceptive and analytical, he is able to reach the heart of a problem and thereafter order clear and concise instructions for the handling of same.

Never content with less than perfection, Mr. Gale, with his outstanding qualities of leadership, instills the same desire in his subordinates. His dedication to the aims and ideals of this organization, his willingness to readily subordinate personal considerations to the best interests of the Bureau, and his remarkable attitude have won him the respect and admiration of all with whom he comes in contact. Possessing a warm, friendly, and mature personality, being aggressive yet tactful, and making a most striking appearance, Mr. Gale is most effective in his contacts with Bureau personnel at all levels and with representatives of other law enforcement agencies. He has consistently proven himself to be a most valued member of the FBI.

JAMES H. GALE

May 4, 1971

Mr. Tolson	✓
Mr. Sullivan	✓
Mr. Mohr	✓
Mr. Bishop	✓
Mr. Brennan	CD
Mr. Callahan	✓
Mr. Casper	_____
Mr. Conrad	_____
Mr. DeLoach	_____
Mr. Felt	_____
Mr. Gale	_____
Mr. Rosen	_____
Mr. Tavel	_____
Mr. Walters	_____
Mr. Soyars	_____
Tele. Room	_____
Miss Holmes	_____
Miss Gandy	_____

Mr. John Edgar Hoover
Director
Federal Bureau of Investigation
Washington, D. C.

Dear Mr. Hoover:

I just received the beautiful color portrait of you and I am absolutely delighted with it.

I want you to know that I am deeply appreciative of your kindness and this portrait will always remain one of my most treasured possessions.

With cordial good wishes, I am

Sincerely,

James H. Gale
James H. Gale

67-137786-506	
Searched	Numbered
4 MAY 5 1971	

137
MAY 12 1971 35

Yew

UNITED STATES GOVERNMENT

Memorandum

TO : Mr. Mohr

DATE: May 13, 1971

FROM : Mr. Callahan

SUBJECT: JAMES H. GALE
Assistant Director
Special Investigative Division
Married, 2 Children
Age 49
SERVICE AWARD MATTER
30th Anniversary 7-19-71

Tolson _____
Sullivan _____
Mohr _____
Bishop _____
Brennan, C.D. _____
Callahan _____
Casper _____
Conrad _____
Dalbey _____
Felt _____
Gale _____
Rosen _____
Tavel _____
Walters _____
Soyars _____
Tele. Room _____
Holmes _____
Gandy _____

Mr. James H. Gale, Assistant Director of the Special Investigative Division, celebrates his 30th year of Bureau service on 7-19-71.

During the past three years he has been commended twice. On 4-5-71 he received an incentive award in the amount of \$500 for an Outstanding performance report. Censured 3 times, the last of which was on 10-14-70 for failing to keep the Director advised of significant information in an important matter. He is presently in Grade GS-18, \$36,000, and was rated Outstanding on last performance report.

The Director may desire to present Mr. Gale's letter and Key personally on 7-19-71. A suggested letter is attached for the Director's signature.

Enclosure

1 - Miss Holmes (Sent Direct)

LDH:bla

(3)

REMOVED BY SRA

MAY 21 1971

REC-134

67-137706 507
5 MAY 20 1971

April 23, 1971

Mr. James H. Gale
Federal Bureau of Investigation
Washington, D. C.

Dear Mr. Gale:

It affords me pleasure to commend, through you, the personnel in the Departmental Applicant Unit of the Special Investigative Division who have performed so admirably over the past several months.

These employees exhibited a splendid spirit of cooperation and discharged their assigned duties with skill and accuracy despite an increased volume of work. I want you to express my appreciation to all concerned.

Sincerely yours,

J. Edgar Hoover

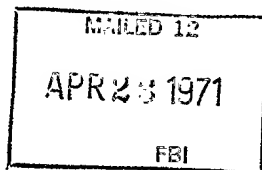
1 - Mr. Gale (Personal Attention)

A copy of this letter will be placed in the files of all participants.

1 - Mrs. [redacted] (Sent Direct) b6

BLG:ly (19)

Based on memo from Martin to Gale 4/20/71 re Departmental Applicant (Non professional) Unit, Employees Security and Special Inquiry Section, Special Investigative Division, Commendation Matter.

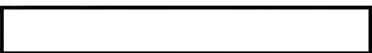


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Bishop _____
Crennan, C.D. _____
Callahan _____
Casper _____
Conrad _____
Dalbey _____
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Holmes _____
Gandy _____

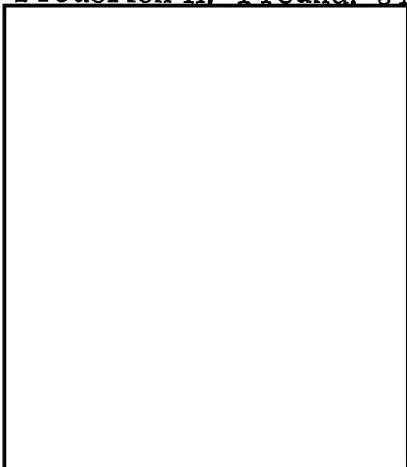
MAIL ROOM ☐ TELETYPE UNIT ☐

Copies prepared and attached for placing in the personnel files of: OVE

Mr. James H. Gale
FBI - Washington, D. C.



Frederick H. Freund, Jr.



b6

RECEIPT FOR GOVERNMENT PROPERTY
FEDERAL BUREAU OF INVESTIGATION
UNITED STATES DEPARTMENT OF JUSTICE

Date 6-25-71

I certify that I have ☐ received ☐ returned the following Government property for official use:

D. C. OFFICIAL PARKING PERMIT #6277 ✓
expires 6-30-72

RETURNED

D. C. OFFICIAL PARKING PERMIT #3148
expires 6-30-71

READ

The Government property which you hereby acknowledge is charged to you and you are responsible for taking care of it and returning it when its use has been completed.

DO NOT MARK OR WRITE ON IT OR MUTILATE IT IN ANY WAY.

Very truly yours,

(Signature)

(Typed name) J. H. Gale

9 JUL 27 1971

48

May 26, 1971

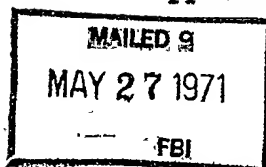
PERSONAL

Mr. James H. Gale
Federal Bureau of Investigation
Washington, D. C.

Dear Gale:

You are to be commended for the noteworthy guidance and direction you afforded to the field in connection with gambling raids recently carried out by the Detroit Division.

I have been gratified by the success attained in this undertaking and I realize that your contributions thereto were substantial. You may be assured of my appreciation.



Sincerely yours,

J. Edgar Hoover

1 - Mrs. [redacted] (Sent Direct)

b6

RHC:tjr-- (4) 67-137786

Based on memo Bassett-Callahan 5/20/71 re Organized Crime Matters, Detroit Division, Incentive Award - Commendation Matter.

Salutation per file

67-137786-509

JUN 1 1971

Tolson _____
Sullivan _____
Mohr _____
Bishop _____
Brennan, C.D. _____
Callahan _____
Casper _____
Conrad _____
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Walters _____
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Tele. Room _____
Holmes _____
Gandy _____

MAIL ROOM ☐ TELETYPE UNIT ☐

July 19, 1971

PERSONAL

Mr. James H. Gale
Federal Bureau of Investigation
Washington, D. C.

Dear Gale:

It is indeed most pleasant for me to recognize your anniversary of thirty years of exemplary service to the FBI, and to express my appreciation for your untiring efforts in our behalf. As an additional reminder of this accomplishment, I am hereby presenting you with the Bureau's Thirty-Year Service Award Key.

Such an occasion means much more than just the passage of time. It signifies years of loyal devotion and public service and a period of hard work which has produced concrete results. Because of the personal sacrifices of our many faithful associates such as you, the Bureau today is preeminent in the field of law enforcement. Without the tremendous efforts of men of your caliber we could not have achieved this enviable position.

It is my earnest hope that you will wear this Key proudly, not only as a symbol of our organization, but also as a sign of your participation in its progress.

With best wishes and kindest personal regards,

Sincerely,

J. EDGAR HOOVER

67-137786-510

JUL 19 1971

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Mohr _____
Bishop _____
Brennan, C.D. _____
Callahan _____
Casper _____
Conrad _____
Dalbey _____
Felt _____
Gale _____
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Tavel _____
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Tele. Room _____
Holmes _____
dy _____

Enclosure

1 - Miss Holmes (Sent Direct)

LDH:bla

(4)

67-137786

Salutation per file.

Based on memo Callahan-Mohr 5-13-71 LDH:bla.

MAIL ROOM ☐ TELETYPE UNIT ☐

SENT FROM D. O.

TIME _____
DATE 7/19/71
BY _____

July 20, 1971

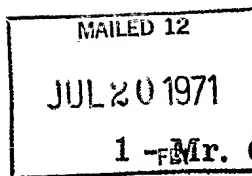
Mr. James H. Gale
Federal Bureau of Investigation
Washington, D. C.

Dear Mr. Gale:

It is with considerable pleasure that I commend you and, through you, the personnel of the Fugitive Section of the Special Investigative Division who assisted so capably in the extremely fine statistical accomplishments attained during Fiscal Year 1971.

The excellent record achieved can be attributed to the splendid manner in which everyone carried out his specific responsibilities during the past year. I want to thank you for your expert leadership and ask that you convey my appreciation to all concerned for their very fine efforts in our behalf.

Sincerely yours,
J. Edgar Hoover



REC-140

1 AUG 1 1971

A copy of this letter will be placed in the files of all participating personnel.

REC-140 XEROX
1 AUG 18 7

1 - Mrs. [] (Sent Direct)

JAB:sma (29)

Based on memo Eddy-Gale of 7/14/71 re Fugitive Section, Special Investigative Division, Statistical Accomplishments.

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MAIL ROOM ☐ TELETYPE UNIT ☐

Copies prepared & attached for placing in the files of: OVER

Mr. James H. Gale
FBI - Washington, D. C.

Alfred B. Eddy
Julian B. Engelstad



J. Russell Faulkner
August B. Fipp, Jr.



Walter R. Happell
Judson J. Hodges



Maurice A. Kelliher



James M. Powers



b6

Name: **JAMES H. GALE**Date: **August 24, 1971**

APPLICATION

- ☒ The "Application for Retirement" will be forwarded by the Bureau to the Civil Service Commission (CSC) for approval.
- ☐ The enclosed "Application for Retirement" should be executed (or changed as indicated below) and promptly returned to the Bureau for forwarding to the Civil Service Commission (CSC) for approval. The information sheet attached to the application is for your records and you should detach it before sending in the application.

DEPOSIT OR REDEPOSIT

- Making either a deposit or redeposit is optional. Such amounts are paid directly by you to CSC; therefore, it is possible that you have already made the deposit or redeposit indicated below without the Bureau's knowledge, having dealt directly with CSC. If so, you may ignore this matter now. If not, after a review of the approximate annuity figures shown below, should you decide to make a deposit or redeposit, you should request Bureau to forward Standard Form 2803 to you. Return this form to the Bureau.
- ☐ Not applicable.
- ☒ The deposit you may owe is a payment to the retirement fund to cover a period of service during which no retirement deductions were withheld from salary. Credit is given for service not covered by deductions; however, if the deposit is not paid, **322** annuity will be reduced each year by 10% of the amount due as deposit. The amount you may owe is approximately \$ **322**.
- ☐ The redeposit you may owe is a payment to the retirement fund to cover a period of service for which retirement deductions were withheld from your salary but later refunded to you following your separation from civilian employment. No credit is allowed in the computation of annuity for the period of service covered by the refund unless redeposit is made. The amount you may owe is approximately \$ _____.

ANNUITY

Annuities are computed on full months of service. The estimated annuity below is based on your ☒ Bureau service, including 1 year, 4 months, 2 days of accrued sick leave, ☐ other civilian Government service and/or ☒ military service known to us, totalling 33 years, 2 months, 3 days. CSC makes the official computations and determines whether prior service is creditable, advising you direct the exact amount of your annuity. The figures below are only estimates, and they do not take account of deduction for health insurance coverage. You should receive the first annuity check about 2 months after separating from the Bureau's rolls. Separation for disability retirement or for SA retirement cannot be made final until CSC has notified FBI of the approval of your application.

TYPES OF ANNUITY

Married applicants only

	With Deposit	Without Deposit	With Redeposit	Without Redeposit	With Deposit & Redeposit
<input checked="" type="checkbox"/> Reduced Type of Annuity with benefit to Spouse (See over, next to last paragraph, Health Benefits Program) \$ _____	\$ 1,696	\$ 1,694	\$ _____	\$ _____	\$ _____
<input checked="" type="checkbox"/> Annuity Without Survivor Benefit \$ _____	\$ 1,859	\$ 1,857	\$ _____	\$ _____	\$ _____

Unmarried applicants only (Including Widowed or Divorced)

<input type="checkbox"/> Annuity without Survivor Benefit \$ _____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Reduced Annuity With Benefit to Person having an Insurable Interest \$ _____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Survivor Annuity (55% of all or the portion of your annuity specified) \$ _____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____

plus annuity for each eligible child.

SEPARATION FROM ROLL:

Since you ☒ will cease active duty ☐ ceased active duty on 9-14-71 your annuity will commence 10-2-71 immediately following the ☐ cease active duty date or ☒ expiration of current accrued annual leave on 10-1-71 earned through 10-1-71. Item B2 on application ☐ changed to ☐ should be changed to close of business

_____. If annual leave was or will be used by you subsequent to _____, this date will change and the Bureau should be immediately advised.

- ☐ If retirement is for disability, separation takes effect after the approval of CSC is received by the Bureau or after the expiration of any accrued sick leave, whichever occurs later. Under Internal Revenue Service regulations, some sick pay and disability income is not taxable; thus, you may be able to exclude from Federal income tax liability all or a part of the payments you receive for sick leave used prior to the date your annuity commenced, as well as for annuity received as a disability annuitant. Any such exemption would terminate when you reach normal retirement age. Thereafter, this annuity would be Federal income tax-free until you had drawn as annuity an amount equal to the retirement deductions from your salary while you were working. CSC will advise you of this amount.
- ☒ If retirement is not for disability, the "sick pay" exclusion is not permissible. Once you have received in annuity as much as was deducted from your salary for retirement purposes, you are subject to Federal Income Tax on the rest. CSC will advise how much was deducted. Only if you were incapacitated and were granted extended sick and/or annual leave for sick leave exceeding thirty calendar days prior to separation for retirement might you qualify for a "sick pay" exclusion for the leave period.
- ☒ Questions you may have as an annuitant regarding your income tax liability or privileges can be answered by the Internal Revenue Service. Internal Revenue Publication, Comprehensive Tax Guide to U.S. Civil Service Retirement Benefits, may be of assistance to you. Note: You are required to file a Federal gift tax return, Form 709, if you elect a reduced annuity with benefit to surviving spouse. In the usual case it is unlikely any tax will be payable; however, a tax return must be filed.
- ☒ You should send CSC over your signature any change in address, setting out your CSA (retirement) number.
- ☒ Following your separation date, you will receive a lump-sum payment for your accumulated annual leave in the approximate amount of \$ **6,575**. A deduction for Federal income tax has been made from this estimate.

ENCLOSURE

7-1-77 512 3/4

FEDERAL EMPLOYEES' GROUP LIFE INSURANCE

☒ Records show you elected Optional Insurance of \$10,000 and have Regular Insurance of \$ 38,000

☐ Records show you declined Optional Insurance but are covered by Regular Insurance of \$ _____

☐ Records show you waived both Regular and Optional Insurance.

You may continue your group life insurance coverage following retirement or convert it to an individual life insurance policy without being required to undergo a physical examination. Conversion to an individual life insurance policy necessitates paying the usual premium for a person of your age and class of risk. If you decide to convert, the Bureau should be immediately advised. Otherwise, SF-56, "Agency Certification of Insurance Status," will be forwarded to CSC and a copy sent to you. If you elect to continue Regular Insurance coverage, such protection will continue premium free until you reach age 65. At that time coverage will be reduced 75% (at 2% per month) by the time you reach age 68 years and 2 months. The remaining 25% is also premium free for the remainder of life. Optional Insurance of \$10,000, if continued after retirement, will be at full premium cost until you reach age 65. Thereafter, it is cost free for the remainder of life and commencing at age 65 it will be reduced 75% at the same rate as Regular Insurance. The premium cost of Optional Insurance varies as to age, beginning at \$2.82 monthly for persons under age 35 and ranging to \$41.17 monthly for persons age 60 or over. Optional Insurance may be continued after retirement if you continue to pay for it until age 65 provided you keep Regular Insurance. If you retain the Optional Insurance, CSC will deduct the cost from your annuity. You must have had Optional Insurance for all of your service during which it was available (first offered in 1968) or for 12 years immediately before your retirement. Optional Insurance may be converted to an individual policy if you are not eligible to continue it or, if you do not wish Optional Insurance to be continued, you may waive coverage at any time by notifying CSC and still keep your Regular Insurance. Following retirement, double indemnity benefits concerning accidental death and dismemberment no longer exist for either Regular or Optional Insurance.

☒ You elected Optional Insurance on 3-2-70. If you desire to waive the insurance, you should submit SF-176. If you desire to convert the Optional Insurance, submit in duplicate a signed statement that you want to convert the Optional Insurance to an individual policy and wish to be informed how to do it.

Note: If the annuity of an insured retired employee is terminated under any applicable law or regulation, his regular and/or optional life insurance coverage stops on the date of such termination, with no conversion rights thereafter.

DESIGNATION OF BENEFICIARY, STANDARD FORM 54, FEDERAL EMPLOYEES' GROUP LIFE INSURANCE FILED:

☒ No. Beneficiary will be in order of precedence used by U.S. Government, i.e., (1) widow or widower, (2) children, (3) parents, etc.

☐ Yes; beneficiary designated as _____

This designation is being forwarded to CSC and it will remain valid unless changed or canceled. Contact CSC for any change desired following retirement.

FEDERAL EMPLOYEES HEALTH BENEFITS PROGRAM

☐ Records show you elected not to enroll.

☒ Records show you enrolled in the following plan:

☐ Government-wide Service Benefit Plan (Blue Cross - Blue Shield)

☐ Government-wide Indemnity Benefit Plan (Aetna Life Insurance Company)

☐ Comprehensive Medical Plan

☒ Special Agents Mutual Benefit Association (SAMBA)

Note: The life insurance you have under this plan will continue in force until 1-10 or 7-10 coinciding with or next following the date of your retirement. If you desire to continue the protection beyond this time, you may do so without a physical examination. You may elect to continue up to age 70 at group rates 50% of your SAMBA Life Insurance. If you presently carry \$3,000 you may continue \$1,500 at a cost of \$3.25 semiannually. If you presently carry

Present Coverage	Amount You Can Continue	Semiannual Cost
7,000	3,500	\$12.25
10,000	5,000	20.00
12,000	6,000	25.75
15,000	7,500	33.50
20,000	10,000	48.00
30,000	15,000	75.00

The 50% of your SAMBA Life Insurance that cannot be continued with SAMBA may be converted to a regular policy with Prudential. At age 70, your coverage will terminate and you may then convert the amount of life insurance carried with SAMBA to a regular policy with The Prudential Insurance Company of America.

Your desire in respect to SAMBA Life Insurance at retirement should be communicated in writing to SAMBA, Suite 750, 1325 G Street, Northwest, Washington, D. C. 20005. If you have Dependents Group Life Insurance this will continue until the next semi-annual premium is due (1-10 or 7-10), with a 31-day grace period. You may continue \$1,000 coverage on your wife at a cost of \$2.25 semiannually until you reach age 70. The \$1,000 that cannot be continued with SAMBA may be converted to a regular policy with The Prudential Insurance Company of America without a medical examination. The premium will be the same as if your spouse applied for an individual policy at that time. You may make the necessary conversion arrangement through the nearest Prudential Office. The life insurance of your children cannot be converted.

Unless you cancel your present enrollment, you will remain under your health benefit plan after retirement, and your enrollment will be transferred to CSC. The cost of your share of the plan will be deducted from your annuity by CSC.

Enrollment of an employee who dies while he is enrolled "for self and family" continues for his family if at least one family member is entitled to an annuity as the survivor. If the survivor annuitant is the only eligible family member, the retirement system will automatically change the enrollment to "self only."

The original of SF 2810, "Notice of Change in Health Benefits Enrollment," will be forwarded to you by the Bureau at a later date.

SPECIAL ACCIDENT AND TRAVEL INSURANCE (SATI)

If you are a member of SATI upon retirement, you cannot continue the Long Term Disability, Pension Supplement and the In-Hospital Income Plan. You may continue the Accidental Death, Dismemberment and Permanent Total Disability Plan and the Accident Medical Expense Plan at the same rates and amounts to age 65. You may also continue the coverage on your spouse to age 65 and your children to age 18 (or up to age 23 if a full-time student.) Upon attainment of age 65 you may only continue the Accidental Death and Dismemberment Plan but not the Permanent Total Disability portion to a maximum of \$25,000 on you and your spouse to age 75. The cost will be 19¢ per month per thousand. The Accident Medical Expense Plan cannot be continued after age 65. If you retire due to disability, you should contact Wright and Company, 1001 Connecticut Avenue, N. W., Washington, D. C. 20036.

ENCLOSURE

☐ Standard Form 2801, "Application for Retirement"

☒ Standard Form 8, "Notice to Federal Employee About Unemployment Compensation"

☒ Pamphlet, "Your Retirement System."

☐ Standard Form 2801-B, "Physician's Statement," for disability retirement.

JAMES H. GALE

August 23, 1971

Mr. John Edgar Hoover
Director
Federal Bureau of Investigation
Washington, D. C.

Dear Mr. Hoover:

Due to family considerations requiring me to devote more time to my responsibilities as a father and a husband, I find it necessary to request retirement at this time to be effective October 1, 1971.

I have been employed with the Bureau since I was 18 years old which is practically my entire adult life and I have certainly enjoyed my career and association with the Bureau. During 20 years of this time I have been in an executive capacity and I consider it a rare privilege and honor to have been so closely associated with you and to have had the benefit of your great and inspiring leadership.

During my career in the Bureau I have received a tremendous amount of consideration and thoughtfulness from you and I want you to know of my heartfelt gratitude to you for the many courtesies and kindnesses which you have extended to me.

REC-144

67-137786-512

I know I will miss the FBI. You have made it a great organization comprised of dedicated and honest men who are truly interested in their country. There is no other organization in the world like it and I will always be proud of my association with it and with you.

Mr. Hoover, I want to wish you the best of good fortune and good health in the future and I hope the FBI and the country have the benefit of your wise counsel and dynamic leadership for many years to come.

If I can ever do anything for you personally or for the FBI, I want you to know you can certainly count on me.

With every good wish, I am

Sincerely,

James H. Gale

Mr. Tolson _____
Mr. Felt _____
Mr. Sullivan _____
Mr. Mohr _____
Mr. Bishop _____
Mr. Casper _____
Mr. Conrad _____
Mr. DeLoach _____
Mr. Gale _____
Mr. Rosen _____
Mr. Tavel _____
Mr. Walters _____
Mr. Soyars _____
Tele. Room _____
Miss Holmes _____
Miss Gandy _____

Given to the Director
on 8/23/71
ack letter
8/24/71

3/1/71

, 1971

Room

N. P. CALLAHAN

ADDITIONAL INFORMATION
SUPPORT OF APPLICATION FOR CIVIL SERVICE RETIREMENT

(To be completed by agency employing office and attached to employee's application for retirement)

GENERAL INSTRUCTION: Consult FPM Supplement 831-1, Retirement, for complete information on Civil Service Retirement.

SPECIFIC INSTRUCTION: Complete both sides of this form and attach to employee's application for retirement, SF 2801. If additional space is needed, use official agency letterhead stationery. Authorized personnel official must certify as shown in Part G on other side of this form.

A. IDENTIFICATION OF APPLICANT

1. NAME OF APPLICANT <i>(Last, First, Middle)</i> GALE, JAMES H.	2. DATE OF BIRTH <i>(Month, Day, Year)</i> 9-28-21	3. SOCIAL SECURITY ACCOUNT NUMBER 294 01 8383
--	--	---

B. INFORMATION CONCERNING ADDITIONAL CREDITABLE CIVILIAN SERVICE, IF ANY

1. SERVICE COMPUTATION DATE <i>(Month) (Day) (Year)</i> 11-29-39	2. REVIEW PERSONNEL FOLDER. DOES APPLICANT HAVE CREDITABLE CIVILIAN SERVICE NOT COVERED BY CIVIL SERVICE RETIREMENT CONTRIBUTIONS <i>(Including Federal service covered by social security or another retirement system for Federal or District of Columbia employees)?</i> <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
---	--

3. IF ANSWER IN ITEM 2 IS YES, COMPLETE SCHEDULE BELOW TO SHOW SERVICE VERIFIED BY OFFICIAL DOCUMENTS IN PERSONNEL FOLDER, INCLUDING THE EFFECTIVE DATE AND RATE OF EACH PAY CHANGE. UNDER "REMARKS" SHOW ANY PERIOD OF LEAVE WITHOUT PAY, TIME ACTUALLY WORKED IF EMPLOYMENT WAS INTERMITTENT, OR TOUR OF DUTY IF EMPLOYMENT WAS PART TIME WITH A REGULAR TOUR OF DUTY.

IMPORTANT: SF 144, Statement of Prior Federal Civilian or Military Service, or comparable document containing applicant's unverified allegation of prior civilian service is NOT acceptable for retirement purposes. If employee claims civilian service NOT verified by official personnel documents, do not delay submission of application for retirement. Instead, have applicant attach a signed statement to his application, giving dates of claimed service, position titles, location of employment, and agency name including bureau and division.

EFFECTIVE DATE	ACTION	BASE PAY	FEDERAL AGENCY	RETIREMENT SYSTEM <i>(If any)</i>	REMARKS

C. INFORMATION CONCERNING CREDITABLE MILITARY SERVICE *(If claimed by applicant)*

1. IF APPLICANT CLAIMS RETIREMENT CREDIT FOR MILITARY SERVICE, IS A COPY OF OFFICIAL MILITARY DISCHARGE CERTIFICATE ATTACHED TO APPLICATION FOR RETIREMENT? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	NOTE: A military discharge certificate submitted with application for retirement is acceptable only if it shows specific dates of active service and character of discharge.
--	--

2. IF APPLICANT HAS NOT ATTACHED AN ACCEPTABLE COPY OF OFFICIAL MILITARY DISCHARGE CERTIFICATE, BUT EXACT DATES OF ACTIVE, HONORABLE MILITARY SERVICE HAVE BEEN VERIFIED IN PERSONNEL FOLDER *(By prior comparison with official military discharge certificate)* FOR VETERANS PREFERENCE OR OTHER PURPOSES, COMPLETE SCHEDULE BELOW. DO NOT DELAY SUBMISSION OF APPLICATION FOR RETIREMENT TO VERIFY SERVICE IF UNVERIFIED. IF SERVICE NOT VERIFIED IN PERSONNEL FOLDER, SO STATE BELOW.

IMPORTANT: SF 144, Statement of Prior Federal Civilian or Military Service, or comparable document containing applicant's unverified allegation of military service, is not acceptable for retirement purposes.

FROM	TO	BRANCH	CHARACTER OF DISCHARGE	TIME LOST, IF ANY
Military Furlough				

67-NOT RECORDED-8

3. IS APPLICANT IN RECEIPT OF MILITARY RETIRED PAY? <input type="checkbox"/> Yes. Attach a copy of applicant's military retired pay order, if available. <input checked="" type="checkbox"/> AUG 31 1977	4. IF YES, HAS APPLICANT WAIVED MILITARY RETIRED PAY TO CREDIT MILITARY SERVICE FOR CIVIL SERVICE RETIREMENT? <i>(See FPM Supplement 831-1, Retirement, Subchapter S3-5f.)</i> <input type="checkbox"/> Yes. Attach copy of military finance center letter to employee accepting waiver, if available. <input type="checkbox"/> No. <i>(Includes cases where waiver unnecessary)</i>
---	--

D. TYPE OF IMMEDIATE RETIREMENT

1. <input type="checkbox"/> AGE	• Enter date that notice of mandatory separation was given to employee _____ (Date)
2. <input checked="" type="checkbox"/> OPTIONAL (Voluntary)	• If retirement is under special provision for law enforcement employees, <u>attach</u> agency head's recommendation.
3. <input type="checkbox"/> DISCONTINUED SERVICE	• <u>Attach</u> certified summary of events leading to separation and copies of all relevant documents exchanged with employee.
4. <input type="checkbox"/> DISABILITY	<ul style="list-style-type: none"> • Prepare two copies of SF 2801-C, transmittal of medical documents, according to instructions on SF 2801-C. • <u>Attach Duplicate</u> copy of SF 2801-C to this form for submission with application for retirement, SF 2801. • <u>Send Original</u> copy of SF 2801-C with medical documents to civil service commission office having medical jurisdiction over disability retirement from the applicant's place of employment.

E. FEDERAL EMPLOYEES GROUP LIFE INSURANCE AND HEALTH BENEFITS STATUS

1. IS APPLICANT ELIGIBLE TO CONTINUE GROUP LIFE INSURANCE COVERAGE DURING RETIREMENT? (See Federal Personnel Manual supplement 870-1, Life Insurance, subchapter S6, for detailed instructions)	
<input checked="" type="checkbox"/> YES. Enter following information below: <input checked="" type="checkbox"/> Eligible to continue regular insurance only. <input type="checkbox"/> Eligible to continue regular plus optional insurance; continuous optional insurance coverage since: <div style="text-align: center;">3-2-70</div> <div style="text-align: center;"><small>(Insert date of most recent SF 176, Election, Declination, or Waiver of life insurance coverage)</small></div>	<input type="checkbox"/> NO. Give reason below: <input type="checkbox"/> Less than 12 years service for life insurance purposes and retirement not for disability. <input type="checkbox"/> Waived all life insurance coverage. <input type="checkbox"/> Not eligible for life insurance. <input type="checkbox"/> Other (specify) _____
2. IS APPLICANT ELIGIBLE TO CONTINUE FEDERAL EMPLOYEES HEALTH BENEFITS ENROLLMENT DURING RETIREMENT? (See Federal Personnel Manual supplement 890-1, health benefits, subchapter S14, for detailed instructions)	
<input checked="" type="checkbox"/> YES. Enter following information: <div style="text-align: center;">442</div> <div style="text-align: center;"><small>Enrollment Code Number</small></div> <div style="text-align: center;">3210032</div> <div style="text-align: center;"><small>Carrier Control Number</small></div>	<input type="checkbox"/> NO. Give reason below: <input type="checkbox"/> Less than 12 years service for health benefits purposes and retirement not for disability. <input type="checkbox"/> Not enrolled since first opportunity or for 5 years of service immediately before retirement, whichever is less. <input type="checkbox"/> Not enrolled for health benefits. <input type="checkbox"/> Other (specify) _____
3. DOCUMENTATION: If employee is eligible to continue life insurance coverage and/or health benefits enrollment during retirement, determine which of the two procedures below will be followed in submitting SF 2801, Application for Retirement. After life insurance and/or health benefits actions have been taken, check appropriate box(es) below.	
PROCEDURE 1: AGE, OPTIONAL, OR DISCONTINUED SERVICE RETIREMENT SF 2801 (Application for Retirement) and SF 2806 (Individual Retirement Record) will be submitted <u>after</u> separation for retirement. LIFE INSURANCE DOCUMENTATION <input type="checkbox"/> Applicant eligible for continued life insurance coverage. Upon separation attach original copy of SF 56 (Agency Certification of Insurance Status) NOTE: Carefully observe instructions on SF 56 for attaching SF 54, Designation of Beneficiary if current SF 54 is on file in personnel folder. HEALTH BENEFITS DOCUMENTATION <input type="checkbox"/> Applicant eligible for continued health benefits enrollment. Upon separation attach personnel folder copy of SF 2810 (Transferring enrollment to Civil Service Retirement System) and all personnel folder copies of SF 2809 and SF 2810 together with any medical certificates.	PROCEDURE 2: DISABILITY RETIREMENT OR LAW ENFORCEMENT EMPLOYEE SF 2801 (Application for Retirement) and SF 2806 (Preliminary Retirement Record) will be submitted for approval <u>before</u> separation for retirement. LIFE INSURANCE DOCUMENTATION <input checked="" type="checkbox"/> Applicant eligible for continued life insurance coverage. Establish follow up to assure that original copy of SF 56 (Agency Certification of Insurance Status) and any current SF 54 (Designation of Beneficiary) will be attached to final SF 2806 (Individual Retirement Record) when submitted <u>after</u> separation for retirement. HEALTH BENEFITS DOCUMENTATION <input checked="" type="checkbox"/> Applicant eligible for continued health benefits enrollment. Establish follow up to assure that personnel folder copy of SF 2810 (Transferring enrollment to Civil Service Retirement System) and all personnel folder copies of SF 2809 and SF 2810 together with any medical certificates are attached to final SF 2806, when submitted <u>after</u> separation for retirement.

F. INSTRUCTIONS TO AGENCY PAYROLL OFFICE

1. Verify that life insurance and health benefits status as shown on this form are consistent with payroll records. 2. Be sure to post unused sick leave and confirmed pay status remarks on certified SF 2806, Individual Retirement Record. 3. Submit SF 2801, Application for Retirement, together with certified SF 2806, Individual Retirement Record, and required attachments, to the U.S. Civil Service Commission, Bureau of Retirement, Insurance, and Occupational Health, Washington, D.C. 20415, within time limits prescribed in FPM Supplement 831-1, Subchapter 2.
--

G. AGENCY EMPLOYING OFFICE CERTIFICATION

I certify that the information contained on this form accurately reflects official personnel records in the custody of this agency.	
SIGNATURE OF AUTHORIZED AGENCY PERSONNEL OFFICIAL	
OFFICIAL TITLE Personnel Officer	DATE 3-24-71
AGENCY NAME AND ADDRESS, INCLUDING ZIP CODE, AND TELEPHONE NUMBER, INCLUDING AREA CODE 1300 9th St. and Penn. Ave., N.W. Washington, D.C. 20535	

REPORT OF MEDICAL EXAMINATION

FBI

1. LAST NAME—FIRST NAME—MIDDLE NAME Gale, James Henry			2. GRADE AND COMPONENT OR POSITION Assistant Director		3. IDENTIFICATION NO. 5-66-63	
4. HOME ADDRESS (Number, street or RFD, city or town, State and ZIP Code)			5. PURPOSE OF EXAMINATION Annual		6. DATE OF EXAMINATION 8-5-71	
7. SEX	8. RACE	9. TOTAL YEARS GOVERNMENT SERVICE MILITARY CIVILIAN		10. AGENCY	11. ORGANIZATION UNIT	
12. DATE OF BIRTH 9-28-21		13. PLACE OF BIRTH Ohio		14. NAME, RELATIONSHIP, AND ADDRESS OF NEXT OF KIN		
15. EXAMINING FACILITY OR EXAMINER, AND ADDRESS NNMC				16. OTHER INFORMATION		
17. RATING OR SPECIALTY				TIME IN THIS CAPACITY (Total)		LAST SIX MONTHS

CLINICAL EVALUATION		
NOR- MAL	(Check each item in appropriate column; enter "NE" if not evaluated.)	ABNOR- MAL
	18. HEAD, FACE, NECK AND SCALP	
	19. NOSE	
	20. SINUSES	
	21. MOUTH AND THROAT	
	22. EARS—GENERAL (Int. & ext. canals) (Auditory acuity under items 70 and 71)	
	23. DRUMS (Perforation)	
	24. EYES—GENERAL (Visual acuity and refraction under items 59, 60 and 67)	
	25. OPHTHALMOSCOPIC	
	26. PUPILS (Equality and reaction)	
	27. OCULAR MOTILITY (Associated parallel movements, nystagmus)	
	28. LUNGS AND CHEST (Include breasts)	
	29. HEART (Thrust, size, rhythm, sounds)	
	30. VASCULAR SYSTEM (Varicosities, etc.)	
	31. ABDOMEN AND VISCERA (Include hernia)	
	32. ANUS AND RECTUM (Hemorrhoids, fistulae) (Prostate, if indicated)	
	33. ENDOCRINE SYSTEM	
	34. G-U SYSTEM	
	35. UPPER EXTREMITIES (Strength, range of motion)	
	36. FEET	
	37. LOWER EXTREMITIES (Except feet) (Strength, range of motion)	
	38. SPINE, OTHER MUSCULOSKELETAL	
	39. IDENTIFYING BODY MARKS, SCARS, TATTOOS	
	40. SKIN, LYMPHATICS	
	41. NEUROLOGIC (Equilibrium tests under item 72)	
	42. PSYCHIATRIC (Specify any personality deviation)	
	43. PELVIC (Females only) (Check how done) <input type="checkbox"/> VAGINAL <input type="checkbox"/> RECTAL	

NOTES. (Describe every abnormality in detail. Enter pertinent item number before each comment. Continue in item 73 and use additional sheets if necessary.)

17.7 HGB
54 HCT
6,000WBC

9.5 CA
34 Inor. Phos. Creatinine 1.2
105 Glu
17 Bun
5.6 Uric Acid
245 Chol.
7.3 T. P.
4.6 Alb.
.6 T-Bili.
35 Alk. Phos.
135 LDH
25 Sgot

REC-137

9 AUG 23 1971

Reviewed by Dr. Smiddy

(Continue in item 73)

44. DENTAL (Place appropriate symbols, shown in examples, above or below number of upper and lower teeth.)

0 1 2 3 Restorable 32 31 30 teeth	1 2 3 Non- 32 31 30 restorable teeth	1 2 3 Missing 32 31 30 teeth	1 2 3 Replaced 32 31 30 by dentures	1 2 3 Fixed 32 31 30 Partial dentures
R I G H T	1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24	1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24	1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24	1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24

REMARKS AND ADDITIONAL DENTAL DEFECTS AND DISEASES

Exam. Type 3
Class 1
NCD

LABORATORY FINDINGS

45. URINALYSIS: A. SPECIFIC GRAVITY 1.017		46. CHEST X-RAY (Place, date, film number and result) 2940183-83 Neg 30002-70	
B. ALBUMIN Neg	D. MICROSCOPIC Ess-Neg	50. OTHER TESTS X-Ray - R. Hand - Neg	
C. SUGAR	48. EKG WNL NSC Since 70	49. BLOOD TYPE AND RH FACTOR	
47. SEROLOGY (Specify test used and result) Neg		50. OTHER TESTS	

MEASUREMENTS AND OTHER FINDINGS

51. HEIGHT 6'2"		52. WEIGHT 191		53. COLOR HAIR Brown		54. COLOR EYES Blue		55. BUILD: <input type="checkbox"/> SLENDER <input type="checkbox"/> MEDIUM <input type="checkbox"/> HEAVY <input type="checkbox"/> OBESE				56. TEMPERATURE					
57. BLOOD PRESSURE (Arm at heart level)						58. PULSE (Arm at heart level)											
A. SITTING SYS. 120 DIAS. 80		B. RECUMBENT SYS. DIAS.		C. STANDING (3 min.) SYS. DIAS.		A. SITTING 64		B. AFTER EXERCISE		C. 2 MIN. AFTER		D. RECUMBENT		E. AFTER STANDING 3 MIN.			
59. DISTANT VISION						60. REFRACTION						61. NEAR VISION					
RIGHT 20/20 CORR. TO 20/						BY 1.50 S. Sph CX						J12 CORR. TO J1 BY					
LEFT 20/25 Pinhole CORR. TO 20/15-1						BY 1.75 S. -0.50 CX 175°						J10 CORR. TO J2 BY					
62. HETEROPHORIA (Specify distance)																	
ES°		EX°		R. H.		L. H.		PRISM DIV.		PRISM CONV. CT		PC		PD			
63. ACCOMMODATION				64. COLOR VISION (Test used and result)				65. DEPTH PERCEPTION (Test used and score)				66. FIELD OF VISION					
RIGHT LEFT				Farnsworth 9/9								Normal O U					
66. FIELD OF VISION				67. NIGHT VISION (Test used and score)				68. RED LENS TEST				69. INTRAOCULAR TENSION					
												5.6 mm Hg OD 14.6 mmHg OS 12.2 mmHg					
70. HEARING				71. AUDIOMETER								72. PSYCHOLOGICAL AND PSYCHOMOTOR (Tests used and score)					
RIGHT WV /15 SV /15				250 266 500 512 1000 1024 2000 2048 3000 2396 4000 4096 6000 6144 8000 8192													
LEFT WV /15 SV /15				RIGHT 10 5 15 5 45 50 55 45 LEFT 15 15 5 20 45 70 65 70													
73. NOTES (Continued) AND SIGNIFICANT OR INTERVAL HISTORY																	
OK																	

High frequency loss.

(Use additional sheets if necessary)

74. SUMMARY OF DEFECTS AND DIAGNOSES (List diagnoses with item numbers)

75. RECOMMENDATIONS—FURTHER SPECIALIST EXAMINATIONS INDICATED (Specify)

76. A. PHYSICAL PROFILE						
P	U	L	H	E	S	

77. EXAMINEE (Check)

A. ☒ IS QUALIFIED FOR
B. ☐ IS NOT QUALIFIED FOR

78. IF NOT QUALIFIED, LIST DISQUALIFYING DEFECTS BY ITEM NUMBER

B. PHYSICAL CATEGORY			
A	B	C	E

79. TYPED OR PRINTED NAME OF PHYSICIAN

SIGNATURE

80. TYPED OR PRINTED NAME OF PHYSICIAN

SIGNATURE

81. TYPED OR PRINTED NAME OF DENTIST OR PHYSICIAN (Indicate which)

SIGNATURE

82. OR APPROVING AUTHORITY

SIGNATURE

NUMBER OF ATTACHED SHEETS

EBI

**Attachment to Standard Form 88, Report of Medical Examination
For Information and Guidance of Medical Examiner**

Name of Examinee Gale, James Henry
(Type or print) Last First Middle

The following portions of the attached examination report form need not be completed:

3	9	62	69
4	11	65	72
8	14	67	76
	17	68	

45, 46, 47 and 49; required for all Special Agent and FBI National Academy applicants but not for any other applicant unless the examining physician deems one, two, three or all four of the examinations necessary. 45, 46 and 47 are required in examination of any current employee.

48. Not required unless examinee is over 35 years of age or examination indicates such is desirable.

71. Audiometer examinations should be afforded whenever possible for all Special Agent applicants and Special Agents. Applicants for the Special Agent position will not be accepted if the hearing loss exceeds a 15 decibel average in either ear in the conversational speech range (500, 1000, 2000 cycles).

For All Examinees, Whether Clerical or Special Agent Applicants or Employees:

The medical examiner should answer the following question:

Examinee ☒ is ☐ is not qualified for strenuous physical exertion.

To be Answered in the Case of All Male Employees and Male Applicants:

1. Does examinee have any defects restricting or prohibiting his participation in defensive tactics and dangerous assignments which might entail the practical use of firearms?

☒ No ☐ Yes If "yes" please specify defects. _____

2. Does examinee have any defects prohibiting safe operation of motor vehicles?

☒ No ☐ Yes If "yes" please specify defects. _____

3. For safe driving of motor vehicles, Civil Service Commission requires distant vision must test at least 20/40 in one eye and 20/100 in the other, corrected or uncorrected. Should examinee wear corrective glasses while operating a motor vehicle? ☐ Yes ☒ No

If recommendation is based on a factor other than above standard, indicate basis _____

ENCLOSURE

copy sent

67-12728-5/3

OFFICE

9-7-73

Desirable Weight Ranges for Males

Height	Small Frame	Medium Frame	Large Frame
5'4"	117 - 125	123 - 135	131 - 148
5'5"	120 - 129	126 - 139	134 - 152
5'6"	124 - 133	130 - 143	138 - 157
5'7"	128 - 137	134 - 148	143 - 162
5'8"	132 - 141	138 - 152	147 - 166
5'9"	136 - 146	142 - 156	151 - 170
5'10"	140 - 150	146 - 161	155 - 175
5'11"	144 - 154	150 - 166	160 - 180
6'	148 - 158	154 - 171	164 - 185
6'1"	152 - 163	158 - 176	169 - 190
6'2"	156 - 167	163 - 181	174 - 195
6'3"	160 - 171	168 - 186	178 - 200
6'4"	169 - 180	178 - 196	188 - 210
6'5"	174 - 185	182 - 202	192 - 216

4. Examinee's frame is ☐ small ☐ medium ☒ large

5. Considering above weight table, the examinee's frame, and other individual physical characteristics, I consider his present weight ☒ Satisfactory ☐ Excessive ☐ Deficient

6. Under proper medical supervision, employee should ☐ lose _____ pounds

☐ gain _____ pounds

Remarks: _____

/s/

Signature of Medical Examiner

8-5-71

Date

b6

August 24, 1971

PERSONAL

Mr. James H. Gale
Federal Bureau of Investigation
Washington, D. C.

Dear Gale:

I have your letter of August 23, 1971, concerning retirement and want to reiterate the regret at seeing you leave which I orally expressed to you yesterday.

You have acquitted yourself most creditably over a period of many years and under difficult and trying conditions. The Bureau has benefited heavily from your assistance, and your services certainly will be missed.

I appreciate your laudatory comments and shall remember your offer to help in the future. It is my hope that the years ahead will be most happy and rewarding ones for Mrs. Gale and you.

WEC:skm
(7) ENCLOSURE

Sincerely,

J. Edgar Hoover

- 1 - Miss [redacted]
- 1 - Voucher-Statistical Section (Sent Direct)
- 1 - Miss [redacted] Last physical on 11-5-70)
- 1 - Mr. Jones--Assistant Director Gale's cease active duty date is 9-14-71. EOD 11-29-39, Clerk; 6-21-43, SA. Place on Special Correspondents' List as his services have been satisfactory. Forwarding address: 3307 Rocky Mount Road, Fairfax, Virginia 22030

NOTE: Assistant Director Gale will be qualified by age and service for retirement under liberalized provisions of the Civil Service Retirement Act. He is assigned as Assistant Director, Special Investigative Division, in GS-18, \$36,000 per annum. He will be provided with pertinent retirement information through the Personnel Section.

Salutation per file.

Tolson _____
Felt _____
Sullivan _____
Mohr _____
Bishop _____
Brennan, C.D. _____
Callahan _____
Casper _____
Conrad _____
Dalbey _____
Gale _____
Ponder _____
Rosen _____
Tavel _____
Walters _____
Soyars _____
Tele. Room _____
Holmes _____
Gandy _____

MAIL ROOM ☐ TELETYPE UNIT ☐

Jan 23 H. Gale

OFFICE OF DIRECTOR, FEDERAL BUREAU OF INVESTIGATION

OFFICIAL INDICATED BELOW BY CHECK MARK

The
 we
 the
 the
 for MICHAEL
 I want
 Gale's
 badge
 mounted.



67-13750-514

REMARKS: REC-134

9 AUG 27 1971

Re - James H. Gale

Retirement

EOD 11-29-39

cad 9-14-71

SA 6-21-43

off 10-1-71

3 SEP 8

93

UNITED STATES GOVERNMENT

Memorandum

TO : MR. SULLIVAN *JS*

DATE: 8/23/71

FROM : J. H. GALE *JHG*

SUBJECT: BERNICE T. GALE
WIFE OF ASSISTANT DIRECTOR
JAMES H. GALE

JS
Sullivan _____
Mohr _____
Bishop _____
Brendan, C.D. _____
Casper _____
Conrad _____
Dalbey _____
Gale _____
Ponder _____
Rosen _____
Tavel _____
Walters _____
Soyars _____
Tele. Room _____
Holmes _____
Gandy _____

Boyle
Fitz

My wife called me at 5:05 p.m. and told me she and my father-in-law, while shopping for antiques in a store on Wilson Boulevard, Arlington, Virginia, together with other individuals had just been robbed at gunpoint at 4:00 p.m. in broad daylight by three Negro males. She advised that they took \$25.00 from her and \$70.00 from my father-in-law. She advised that the police were arriving at that time and wanted to obtain a statement from her. I told her to furnish the police with a complete statement. She further advised that she hid her diamond ring in her mouth and they did not obtain this from her. She stated she also was able to hide her credit cards and her father's watch on her person and the robbers did not get these.

ACTION

For information.

we

Per
7

- 1 - Mr. Sullivan
- 1 - Mr. Gale

JHG:LS
(3)

REC-144

ONE SHOT 67-137786-510
WAS FIRED 7 AUG 27 1971 61

7

EXP

2 SEP 1 1971

UNITED STATES GOVERNMENT

Memorandum

Tolson _____
Felt _____
Sullivan _____
Mohr _____
Bishop _____
Egan, C.D. _____
Callahan _____
Casper _____
Conrad _____
Dalbey _____
Gale _____
Ponder _____
Rosen _____
Tavel _____
Walters _____
Soyars _____
Tele. Room _____
Holmes _____
Gandy _____

TO : MR. SULLIVAN

DATE: August 27, 1971

FROM : J. H. GALE

SUBJECT: BOB SMITH
REPORTER
"NEW YORK TIMES"
REQUEST FOR INFORMATION

Reporter Bob Smith of the "New York Times" called me at 1:00 p.m. today and advised that he heard I was retiring and would like to know the reason therefore. I informed him that I had no comment to make to him, at which time he said thank you and hung up. It will be interesting to see if and how he twists my "no comment."

ACTION:

I will advise you of any further press inquiries I receive concerning this matter and unless advised to the contrary, I will continue to advise them "no comment."

- 1 - Mr. Felt
- 1 - Mr. Sullivan
- 1 - Mr. Mohr
- 1 - Mr. Bishop
- 1 - Mr. M. A. Jones
- 1 - Mr. Gale

JHG:dlb

-7-

REC-144

67-137186-516
Searched _____ Numbered _____
1 SEP 2 1971

PERS. REC. UNIT

3 SEP 8 1971

73

b6

September 1, 1971

Honorable Andrew E. Ruddock
Director
Bureau of Retirement, Insurance,
and Occupational Health
Civil Service Commission
Washington, D. C. 20415

Sep 10-1-71
when went to work
10-1-71, 10-2-71
10-2-71

SF 56 p-p 1-10-71
w/10, 11, 12 p-p 9-17-71

Dear Mr. Ruddock:

Enclosed is an Application for Retirement executed by James H. Gale, Assistant Director of the Special Investigative Division of this Bureau, who has indicated that he desires to retire October 1, 1971. There are also enclosed a copy of his Standard Form 2806, a CSC 1084, a Notice of Separation from the United States Naval Service, and Form TUS 6711.

During his service with this Bureau, Mr. Gale has participated in and supervised the investigation of violations of laws of the United States and has performed duties of a hazardous nature. His services have been entirely satisfactory and he will have met the necessary requirements to retire under the provisions of Section 8336(c) of Title 5, United States Code.

In accordance with the action of the Attorney General delegating authority to me to make appropriate recommendations in connection with applications for retirement from employees of the Federal Bureau of Investigation, I hereby recommend that Mr. Gale's retirement be approved.

Sincerely yours,

John Edgar Hoover
Director

- 1 - Mr. Row, 6221 IB
- 1 - Miss [redacted], 4746b6
- 1 - Mrs. [redacted], 515
- 1 - Mr. Jones, 4264
- 1 - Movement, 5524

Tolson _____
Felt _____
Sullivan _____
Mohr _____
Bishop _____
Brennan, C.D. _____
Callahan _____
Casper _____
Conrad _____
Dalbey _____
Gale _____
Ponder _____
Rosen _____
Tavel _____
Walters _____
Soyars _____
Tele. Room _____
Holmes _____
Gandy _____

PTJ:lrl
(8)

Enclosures (5)

NOTE: Active duty will cease 9/14/71; retirement effective 10/1/71.

MAIL ROOM ☐ TELETYPE UNIT ☐

Mr. Tolson *[initials]*
 Mr. Felt *[initials]*
 N C

JAMES H. GALE

September 7, 1971

Mr. John Edgar Hoover
 Director
 Federal Bureau of Investigation
 Washington, D. C.

Mr. Sullivan	
Mr. Mohr	
Mr. Bishop	
Mr. Brennan, C.D.	
Mr. Callahan	
Mr. Casper	
Mr. Conrad	
Mr. Dalbey	
Mr. Gale	<i>[initials]</i>
Mr. Ponder	
Mr. Rosen	
Mr. Tavel	
Mr. Walters	
Mr. Soyars	
Tele. Room	
Miss Holmes	
Miss Gandy	

Dear Mr. Hoover:

Enclosed is a copy of a letter I received Saturday from the Senior Editor of Doubleday and Company who apparently learned of my retirement from the article published in the "New York Times" concerning same. Mr. Congdon states that he would be interested in talking with me about the possibilities of writing a book on my experiences in the FBI. He states he is not talking about "a flaming expose," but "a responsible book that conveys your own intimately informed view of that very important institution."

I have always felt that the Bureau is a "we" organization, not an "I" organization. I have never been a publicity hound nor a glory grabber during my career in the Bureau and I take a dim view of people who leave the Bureau then seek to aggrandize themselves through personal publicity. Therefore, I am advising Doubleday and Company that I am definitely not interested in discussing with them the possibility of my writing a book.

I thought you would be interested in this development.

67-1377810-518
 8 SEP 10 1971
[initials]

REC-135

With cordial good wishes, I am

Sincerely,

James H. Gale

ENCLOSURE *[initials]*

Enclosure

*9-7-71
 JH/g*

[initials]

DOUBLEDAY & COMPANY, INC. *Publishers*



277 PARK AVENUE, NEW YORK, N. Y. 10017 TEL: 212 TA 6-2000

2 September 1971

Mr. James H. Gale
3307 Rocky Mount Road
Fairfax, Virginia 22030

Dear Mr. Gale:

I'd be most interested in talking with you about the possibilities of your writing a book on your experiences in the FBI. I am not talking about a flaming expose. I am thinking of a responsible book that conveys your own intimately informed views of that very important institution.

Phone or drop me a note, and we can arrange to meet, here or there.

Very sincerely yours,

Thomas B. Condon, Jr.
Senior Editor

TBC/jg

67-137726-518
ENCLOSURE

UNITED STATES GOVERNMENT

Memorandum

TO : Mr. Sullivan *JS*

FROM : W. V. Cleveland *WVC*

SUBJECT: JAMES H. GALE
Assistant Director
Special Investigative Division
RETIREMENT

DATE: August 25, 1971

Tolson	_____
Felt	_____
Sullivan	_____
Mohr	_____
Bishop	_____
Brennan, C.D.	_____
Callahan	_____
Casper	_____
Conrad	_____
Dalbey	_____
Gale	_____
Ponder	_____
Rosen	_____
Tavel	_____
Walters	_____
Soyars	_____
Tele. Room	_____
Holmes	_____
Gandy	_____

Cleveland
JS

Assistant Director Gale saw the Director on August 23, 1971, and received permission to retire after more than 30 years of Bureau service. He will be receiving a bull's-eye putter as one of his retirement mementos. When Inspector Thomas J. McAndrews retired he was given a bull's-eye putter which was engraved with the autographed signature of the Director. It is recalled that Assistant Director Gale greatly admired this putter as a particular suitable memento.

ACTION:

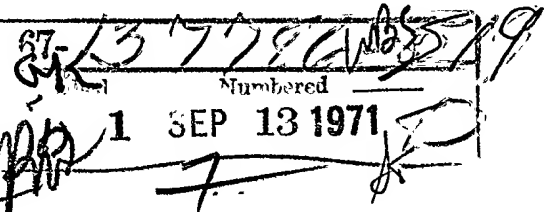
Assistant Director Gale would be highly honored if the Director would approve our having his signature engraved on the bull's-eye putter being given to him.

- 1 - Mr. Sullivan
- 1 - Mr. Mohr
- 1 - Mr. Callahan
- 1 - Mr. Cleveland

WVC:dlb

-5-

V REC-139



SEP 15 1971

37

✓ SEC-133

September 7, 1971

*See file
in folder*

Dear Gale:

Thank you for your letter concerning the offer you have received from Doubleday and Company about the possibility of a book on your experiences in the FBI. I very much appreciate the decision you have reached in this regard as well as your thoughtfulness in advising me about it.

Sincerely,

J. E. H.

Mr. James H. Gale
Federal Bureau of Investigation
Washington, D. C.

V

✓
Tolson _____
Felt _____
Sullivan _____
Mohr _____
Bishop _____
Brennan, C.D. _____
Callahan _____
Casper _____
Conrad _____
Dalbey _____
Gale _____
Ponder _____
Rosen _____
Tavel _____
Walters _____
Soyars _____
Tele. Room _____
Holmes _____
Gandy _____

JEH:rm (3)

SENT FROM D. O.	
TIME	3:20 PM
DATE	9-7-71
BY	

3 SEP 12 1971
MAIL ROOM ☐ TELETYPE UNIT ☐

UNITED STATES GOVERNMENT

Memorandum

TO : MR. SULLIVAN *[initials]*

FROM : W. V. CLEVELAND *[initials]*

SUBJECT: RETIREMENT OF
ASSISTANT DIRECTOR JAMES H. GALE *[initials]*

DATE: September 1, 1971

Tolson _____
Felt _____
Sullivan _____
Mohr _____
Bishop _____
Brennan, C.D. _____
Callahan _____
Casper _____
Conrad _____
Dalbey _____
Gale _____
Ponder _____
Rosen _____
Tavel _____
Walters *[initials]*
Soyars _____
Tele. Room *[initials]*
Holmes _____
Gandy _____

Cleveland *[initials]*

It has been learned that Mr. Gale would like to have as a memento of his years of service in the Bureau a fingerprint ashtray. The personnel of the Special Investigative Division would like to present this to him upon his retirement.

ACTION:

If approved by the Director, a fingerprint ashtray will be ordered for Mr. Gale.

- 1 - Mr. Sullivan
- 1 - Mr. Mohr
- 1 - Mr. Walters
- 1 - Mr. Cleveland

WVC:dlb

-5-

[Handwritten initials: WVC, OK, H]

67-1377-520
Indexed
Numbered
1 SEP 13 1971
7

*Ordered from
Walters + Williams 9-1-71
[initials]*

RECEIVED-100000
SEP 1 1 00 PM '71

SEP 15 1971
(37)

[Handwritten signature]

JAMES H. GALE

September 13, 1971

Mr. Tolson	✓
Mr. Felt	✓
Mr. Sullivan	✓
Mr. Mohr	✓
Mr. Bishop	✓
Mr. Brennan	CD
Mr. Callahan	
Mr. Casper	
Mr. Conrad	
Mr. DeLoach	
Mr. Gale	
Mr. Rosen	
Mr. Tavel	
Mr. Walters	
Mr. Soyars	
Tele. Room	
Miss Holmes	
Miss Gandy	

Mr. John Edgar Hoover
Director
Federal Bureau of Investigation
Washington, D. C.

Miller, E.S.

Dear Mr. Hoover:

I am absolutely delighted with the badge, plaque of service keys and cuff links which you presented me this morning. They are all absolutely beautiful and I want you to know how much I deeply appreciate your thoughtfulness. I will always treasure them tremendously and they will forever remind me of what a great boss you were and what a great organization the FBI is.

Not only today but throughout my entire career you have been most kind and generous to me. I am indeed grateful and I will never forget it. If there is ever anything I can do for you or the FBI I hope you will feel free to call upon me.

Wishing you the utmost of continued happiness, good health and good fortune, I am

Sincerely,

James H. Gale

James H. Gale

RECEIVED-TOLSON
SEP 13 2 12 PM '71

REC-140

67-137786-521
3 SEP 14 1971 39

8 SEP 20 1971

(23)

File
8-128
THUR

UNITED STATES GOVERNMENT

Memorandum

TO : Mr. Bishop *blh*

DATE: 9-15-71

FROM : M. A. Jones *MAJ*

SUBJECT: JAMES H. GALE

EOD: 11-29-39, CLERK; 6-21-43,

SPECIAL AGENT

RETIRED: 9-14-71

Tolson _____
Felt _____
Sullivan _____
Mohr _____
Bishop _____
Miller, E.S. _____
Callahan _____
Casper _____
Conrad _____
Dalbey _____
Cleveland _____
Ponder _____
Rosen _____
Tavel _____
Walters _____
Soyars _____
Tele. Room _____
Holmes _____
Gandy _____

The above-mentioned former Assistant Director who retired on 9-14-71, requested that he receive "The Investigator" in his retirement.

RECOMMENDATION:

That James H. Gale be added to the Special Investigator Mailing List. Gale's forwarding address is: 3307 Rocky Mount Road, Fairfax, Virginia 22030.

- DOB*
APM
- 1 - Mr. Mohr
 - 1 - Mr. Bishop
 - 1 - Mr. Jones

REC-149

67-137786-522
1 SEP 20 1971

MAJ:ksf

(4) *ksf*

added
Invest.
Mailing List
9-15-71
Change Noted
19

8 SEP 22 1971

3/2

JAMES H. GALE

October 12, 1971.

Mr. J. Edgar Hoover,
Director,
Federal Bureau of Investigation,
Washington, D. C.

Personal

Dear Mr. Hoover:

I definitely resented the article by Novak and Evans in the Washington Post yesterday, which by innuendo and implication indicated that I retired because I was disgruntled or dissatisfied with the leadership in the Bureau.

As I indicated to you when I retired I did so because of family considerations and I object to any effort by anyone else to cast me in any other light. I have therefore written a letter to the Washington Post voicing my objections and am enclosing a copy, which I thought you might like to have for your information.

Mr. Hoover, during my career in the Bureau, I always had the utmost of respect and admiration for you and the F.B.I. and I still have these feelings. As I have indicated to you before I deeply appreciate the many kindnesses and considerations which you showed me during my career and will at all times defend you and the Bureau.

With cordial good wishes, I am,

Sincerely

James H. Gale

James H. Gale
3307 Rocky Mount Road
Fairfax, Virginia, 22030

Enclosure:

ENCLOSURE

ACK
10-18-71
JSH:gan
REC-140

67-137786-523	
Searched	Number
7	OCT 22 1971

8/JSH

3A

EX-100
OCT 14 1971

JAMES H. GALE

October 12, 1971
Fairfax, Virginia.

Editor,
The Washington Post
1515 L. Street, N. W.
Washington, D. C.

Dear Sir:

The Novak-Evans column of October 11, 1971, captioned "Deterioration of the F.B.I." mentions my name as having taken "early retirement" as an Assistant Director of the F.B.I. and intimates I did so because I was disgruntled at the way the organization was being run. This is completely false and I am desirous of setting the record straight with regard to the erroneous impressions and distortions created by this article.

First of all, I did not take "early retirement". I was eligible to retire at a regular not a reduced annuity at age 50 after having served over 30 years in the F.B.I. I retired for personal reasons to spend more time with my family after devoting all of my adult life to the service of my Country. I did not retire out of any sense of frustration or of being disgruntled as suggested by the afore-mentioned article. My relationship with Mr. Hoover when I retired was extremely cordial.

To sum it all up I was not a frustrated or disgruntled employee and I have always had and still have the utmost of respect and admiration for Mr. Hoover and the F.B.I. I very strongly resent the effort on the part of anyone to cast me in any other light.

Very truly yours,

James H. Gale
3307 Rocky Mount Road
Fairfax, Virginia, 22030

67-137786-523

RECORDED

#01114 201-01-8383

LAST NAME	FIRST NAME	MIDDLE NAME	SEX		DATE OF BIRTH			AGENCY	PAY ROLL OFFICE	LOCATION
			M	F	MONTH	DAY	YEAR			
1. Gale	James	H.	x		9	28	21	Justice	F.E.I.	Washington
2. _____	_____	_____								
3. _____	_____	_____								
4. _____	_____	_____								

(RECORD EACH NAME CHANGE—STRIKE OUT PREVIOUSLY RECORDED NAME)

SERVICE HISTORY				FISCAL RECORD				
EFFECTIVE DATE	ACTION	BASE PAY	REMARKS	YEAR	CALENDAR YEAR SALARY DEDUCTIONS	ACCUMULATIVE TOTAL SALARY DEDUCTIONS	DO NOT USE	REMARKS
(1)	(2)	(3)	(4)	(5)	Cal. brgt. frwd. (7)			(8)
9/7/58	Promotion	14,190	GS 16	1957		6070.56		
3/6/60	Per Step Inc	14,430	GS 16	1958	877.75	6948.31		
6/7/60	Promotion	15,375**	GS 17	1959	923.52	7871.83		
				1960	998.41	8870.23		
		16,530**		1961	1074.84	9945.07		
12/10/61	Per Step Inc	16,790**	GS 17 SA	1962	1109.56	11054.63		
				1963	1242.26	12296.89		
		18,500**		1964	1485.41	13782.30		
12/9/62	SST	19,000	GS 17	1965	1603.66	15385.96		
11-1-63	PROMOTION	20,000	GS 18	1966	1665.04	17051.00		
BSI (PL 88-426) approved 8/14/64	Effective 7/5/64			1967	1697.80	18748.80		
		24,500		1968	1784.64	20533.44		
BSI (PL 89-391) approved 10/29/65	Effective 10/10/65			1969	2024.97	22560.41		
		25,382						
BSI (PL 89-504) approved 7/18/66	Effective 7/3/66							
		25890						
BSI (PL 90-206) approved 12/16/67	Effective 10/8/67							
		27,055						
BSI (Executive Order 11413) approved								
6/11/68 effective 7/14/68		\$ 28,000						
2-23-69	EXECUTIVE							
	PAY RAISE	\$ 30,239						
BSI (Executive Order 11474) approved								
5/16/69 effective 7/13/69		33,195						

7/14

No. 61144

GALE JAMES H.
(SURNAME) (FIRST NAME) (SECOND NAME)

DATE OF BIRTH			DATE	DÉSIGNATION	OFFICE
MONTH	DAY	YEAR			
SEX		RACE			
RETIREMENT AGE					

DATE	FISCAL YEAR DEDUCTIONS AND SERVICE CREDIT CONTRIBUTIONS	TONTINE DEDUCTIONS	NET FISCAL YEAR DEDUCTIONS AND SERVICE CREDIT CONTRIBUTIONS	DEPARTMENTS ESTABLISHMENTS WILL NOT USE THIS COLUMN	BALANCE FORWARD	TOTAL CREDITED TO EMPLOYEE	DATE OF ORIGINAL APPOINTMENT	REMARKS
6-30-42	25 65	5 00	20 65*			20 65A		DEDS BEGAN 1-24-42
JUN 30 1943	86 81	12 00	74 81*		20 65	95 46A		
JUN 30 1944	160 08	12 00	148 08*		95 46	243 54A		
JUN 30 1945	46 69	4 00	42 69*		243 54	286 23A		
DEC 31 1945	00	00*	00*		286 23	286 23A		
DEC 31 1946	155 06	9 00	146 06*		286 23	432 29A		✓
	474.29	42.00	432.29					
12-31-47	245.18	12.00	233.18		432.29	665.47.		✓
	719.47	54.00	665.47			54.00		Tontine Added 12-31-47
						719.47		Gross Deductions 12-31-47
SERVICE HISTORY					FISCAL RECORD			
EFFECTIVE DATE	ACTION	BASE PAY	REMARKS	YEAR	CALENDAR YEAR SALARY DEDUCTIONS	ACCUMULATIVE TOTAL SALARY DEDUCTIONS	DO NOT USE	REMARKS
8-21-49	Per Inc	6474.60	CAF 12 SA					
Grade and salary fixed by Classification Act of 1949 (P.L. 424 approved 10-28-49)				1948	320.97	1040.44		
		6600.00	GS 12	1949	379.46	1419.90		
			GS 12	1950	395.98	1815.88		
2-18-51	Per Step Inc.	6800.00	GS 12	1951	421.90	2237.78		
*Retroactive to 7-8-51				1952	480.34	2718.12		
*BSI approved October 31, 1951 same grade		7440.00	GS 12	1953	558.01	3276.13		
4-27-52	Promotion	8360.00	GS 13	1954	606.37	3882.50		
6/21/53	Promotion	9600.	GS 14	1955	685.32	4567.82		
**7/18/54	Promotion	10,800.	GS 15	1956	723.06	5290.88		
BSI approved June 28, 1955, same grade				1957	779.68	6070.56		
Retroactive to 8-13-55		11,610	GS 15					
1-15-56	Per Step Inc	11,860	GS 15					
7-14-57	Per Step Inc	12,150*	GS 15					
BSI approved 6/20/58, effective 1/12/58 - PT 35402,								
		13,370*						

9/8

Gale James H.

(SURNAME) (FIRST NAME) (SECOND NAME)

EDUCATION:	COMMON SCHOOL								HIGH SCHOOL				COLLEGE				DEGREES, IF ANY	
(INDICATE NUMBER OF YEARS)	1	2	3	4	5	6	7	8	1	2	3	4	1	2	3	4		
SPECIAL QUALIFICATIONS																		

 $\frac{3}{12}$

AGENCY CERTIFICATION OF INSURANCE STATUS
Federal Employees Group Life Insurance Program

1. NAME (Last) (First) (Middle) 2(a). DATE OF BIRTH (Month, Day, Year) 2(b). SOCIAL SECURITY NUMBER
GALE, JAMES H. **9-28-21** **294 | 01 | 8383**

3. CHECK THE REASON FOR TERMINATING INSURANCE

(a) ☐ SEPARATED (c) ☐ DIED
(b) ☒ RETIRED HAD EMPLOYEE AT TIME OF DEATH APPLIED FOR CIVIL SERVICE ANNUITY? ☐ YES ☐ NO
(d) ☐ 12 MONTHS NON-PAY STATUS (e) ☐ OTHER (Specify)

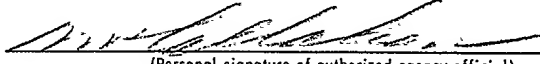
4. CHECK APPROPRIATE BOX CONCERNING SF 54, DESIGNATION OF BENEFICIARY

(a) ☐ CURRENT SF 54 ATTACHED (b) ☒ A CURRENT SF 54 IS NOT ON FILE WITH THIS AGENCY (c) ☐ A CURRENT SF 54 IS ON FILE IN THE EMPLOYEE'S OFFICIAL PERSONNEL FOLDER (OR EQUIVALENT)

NOTE: IF EMPLOYEE (A) DIED OR (B) IS RETIRING OR RECEIVING FEDERAL EMPLOYEES' COMPENSATION UNDER CONDITIONS ENTITLING HIM TO RETAIN HIS LIFE INSURANCE, ATTACH CURRENT SF 54, IF ANY, TO ORIGINAL SF 56 AND CHECK BOX 4 (a) ON ORIGINAL AND ALL COPIES OF SF 56; IF NO CURRENT SF 54 IS ON FILE, CHECK BOX 4 (b). IN ALL OTHER CASES, SHOW WHETHER OR NOT CURRENT SF 54 IS ON FILE BY CHECKING BOX 4 (b) OR (c). A CURRENT SF 54 IS ONE THAT HAS NOT BEEN CANCELED BY EMPLOYEE OR AUTOMATICALLY BY TRANSFER OR PRIOR TERMINATION OF INSURANCE.

5. DATE OF EVENT CHECKED IN ITEM 3 (MONTH, DAY, YEAR) 6. ANNUAL BASIC PAY RATE (NOT AMOUNT OF INSURANCE) ON DATE IN ITEM 5. CONVERT DAILY, HOURLY, PIECEWORK, ETC. RATE TO ANNUAL RATE. 7. DID EMPLOYEE HAVE OPTIONAL INSURANCE ON DATE IN ITEM 5? NO ☐ YES ☒ IF YES, GIVE RECEIPT DATE OF ELECTION OF OPTIONAL INSURANCE (SF 176 or 176-T):
10-1-71 **\$36,000** PER ANNUM **3-2-70**

9. I CERTIFY THAT THE ABOVE INFORMATION HAS BEEN OBTAINED FROM, AND CORRECTLY REFLECTS, OFFICIAL RECORDS AND THAT THE EMPLOYEE NAMED WAS COVERED BY FEDERAL EMPLOYEES GROUP LIFE INSURANCE ON THE DATE SHOWN IN ITEM 5.


(Personal signature of authorized agency official)
N. P. Callahan
(Typed name of authorized agency official)
Federal Bureau of Investigation
(Name of agency)

10-1-71
(Date)
Assistant Director
(Title)
Washington, D. C. 20535
(Mailing address, including ZIP Code of agency)

SEE OTHER SIDE

FOR

INSTRUCTIONS TO EMPLOYING AGENCY

SF56 to employee by Mr. [unclear]
at 1007 Rockwood Road
Shelton, Conn. 06484
958-1000 5-11-71
March 10-1-71 9-2-71

INSTRUCTIONS TO EMPLOYING AGENCY

COMPLETION OF CERTIFICATION

1. This Certification must be completed in triplicate whenever an employee's insurance terminates for:
 - a. Death.
 - b. Retirement on an immediate annuity with 12 or more years' creditable service, of which at least 5 years are civilian service, or on account of disability. (An immediate annuity is one which begins to accrue not later than 1 month after the date the insurance would normally cease.) In a disability retirement case, do not complete SF 56 until a finding of disability has been officially made and the employee's separation is in order.
 - c. Completion of 12 months in a non-pay status or separation, and the employee is receiving benefits under the Federal Employees' Compensation law, and held unable to return to duty.
 - d. Any other reason, if the employee desires to convert his life insurance, except under the following circumstances:
 - (1) Employee waived or declined on SF 176 (or SF 176-T);
 - (2) If it is known that, within 3 calendar days after the date the insurance terminated, the employee will return to Government service in the same or another position in which he will be eligible to reacquire Federal Employees Group Life Insurance;
 - (3) More than 75 days have elapsed from the date insurance terminated unless specific request is made therefor by the Civil Service Commission or the Office of Federal Employees' Group Life Insurance.
2. If insurance terminated on account of death, indicate in item 3(a) whether the employee had filed an Application for Retirement (SF 2801) with the Civil Service Commission.
3. In item 8, give date of Notice of Conversion Privilege (SF 55), except that if this form (SF 56) is issued in lieu of SF 55, give current date. In case of death, leave this item blank.
4. It is important whenever a duplicate SF 56 is issued to replace one which has been lost, that it be clearly marked "DUPLICATE".

DISPOSITION OF CERTIFICATION

1. Death of employee—
 - a. Send duplicate of SF 56 immediately to the Office of Federal Employees' Group Life Insurance.
 - b. Keep the original (preferably in the Official Personnel Folder or its equivalent) for attachment to a claim for death benefits (Form FE-6) when received.
 - c. If no claim is received, send original SF 56, upon request, to the Office of Federal Employees' Group Life Insurance.
 - d. If the deceased employee has a current Designation of Beneficiary (SF 54) on file, the SF 54 must be attached to the original SF 56 when it is sent to the Office of Federal Employees' Group Life Insurance.
2. Retirement of employee—
 - a. If the employee is applying for an immediate annuity with 12 or more years' creditable service (of which at least 5 years are civilian service) or for disability, attach the original SF 56 and current Designation of Beneficiary (SF 54), if any, to the Application for Retirement and give duplicate of SF 56 to the employee, [NOTE: In a disability retirement case where the retirement application has already been sent to the Civil Service Commission, attach the original SF 56 (and SF 54, if any) to the "FINAL" Individual Retirement Record (SF 2806).]
 - b. If the employee wants to continue only his regular insurance, have him complete a SF 176 declining his optional insurance. If he wants to convert only his optional insurance, prepare a statement (see below), in duplicate, for him to sign, attach both copies of the statement to the original SF 56, and submit with application for retirement as instructed in 2a above.

Illustrative Statement

"I want to continue my regular insurance after retirement but would like additional information on converting my optional insurance."

(Employee's signature)

(Address—print or type)

(Date)

- c. If the employee prefers to convert both his regular and optional insurance to an individual policy, give him the original and duplicate copy of the SF 56. Retain SF 54, if any.
3. If employee is receiving compensation benefits—
 - a. Before completing item 7 contact the local Bureau of Employees' Compensation Office, if necessary, to confirm whether the employee still has optional insurance.
 - b. Have the employee complete appropriate box on reverse side of the original SF 56. Send original SF 56 and current Designation of Beneficiary (SF 54), if any, to the U. S. CIVIL SERVICE COMMISSION, BUREAU OF RETIREMENT AND INSURANCE, WASHINGTON, D. C., 20415, and give duplicate copy of SF 56 to the employee.
 - c. If the employee prefers to convert his group insurance to an individual policy, give him the original and duplicate copy of the SF 56. Retain SF 54, if any.
4. All other cases—

Upon request, give the employee the original and duplicate copy of the SF 56 or mail them to him.
5. In all cases—

Retain file copy of the SF 56 in the employee's Official Personnel Folder or its equivalent.

PROMPT CERTIFICATION REQUIRED

The time in which an employee may convert his group life insurance to an individual policy is limited. This SF 56 must be completed and delivered or mailed to him promptly.

UNITED STATES CIVIL SERVICE COMMISSION
BUREAU OF RETIREMENT, INSURANCE, AND OCCUPATIONAL HEALTH
WASHINGTON, D. C. 20415

RCA:EJC:a1m
CSA-1 354 692

09-15-71

U.S. Department of Justice
Federal Bureau of Investigation
Washington, D. C. 20535

Attention Personnel Section
Room 4515

OCT 15 1971
Original Sent to CSC

REQUEST FOR INDIVIDUAL RETIREMENT RECORD (STANDARD FORM 2806)			
NAME (Last) (First) (Middle)		DATE OF BIRTH	SOCIAL SECURITY ACCOUNT NO.
Gale, James H.		09-28-21	294-01-8383
OTHER NAMES UNDER WHICH EMPLOYED		POSITION	
		Assistant Director	
SERVICE CLAIMED IN CONNECTION WITH AN APPLICATION FOR			
<input checked="" type="checkbox"/> ANNUITY <input type="checkbox"/> DEATH BENEFITS <input type="checkbox"/> REFUND <input type="checkbox"/> DEPOSIT OR REDEPOSIT			
PERIODS OF SERVICE FOR WHICH A 2806 IS REQUESTED			
BEGINNING DATE	ENDING DATE	DEPARTMENT OR AGENCY	LOCATION
	10-1-71	FBI	Wash., D. C.

REMARKS: The Commission has approved the retirement of James H. Gale, under Section 8336 (c) 5 USC. Please forward the claimant's retirement record card (Form 2806) as soon as possible after date of final separation.

Rec'd 9/16. Sep 26 10-1-71. End of 9-14-71 when went on cool then 10-1-71 annuity to 10-2-71.

Please attach this form to the 2806 forwarded. If Form 2806 is not submitted, please check one of the boxes on the reverse side of this form and furnish information as required.

NOT RECORDED
OCT 15 1971

59

Jack Goldberg
Jack Goldberg
Chief, Claims Division

3/12

United States Civil Service Commission
Bureau of Retirement, Insurance, and Occupational Health
Claims Division
Washington, D.C. 20415

The requested information is furnished below as indicated by checked box:

☐ Form 2806 covering service claimed forwarded to the Civil Service Commission.

DATE FORM 2806 FORWARDED	REGISTER OF SEPARATIONS NO.
NAME AND DATE OF BIRTH SHOWN ON FORM 2806	

☐ No record of employment in this department or agency.

☐ Form 2806 cannot be forwarded. Employee on furlough until

(DATE)

☐ Employee not subject to the Civil Service Retirement System:

FROM	TO
REASON FOR SEPARATION	

Remarks

SEP 17 11 49 AM 1971

FBI
DIVISION

(AUTHORIZED CERTIFYING OFFICER)

(DATE)

(TITLE)

APPLICATION FOR RETIREMENT CIVIL SERVICE RETIREMENT SYSTEM

(USE ONLY IF SEPARATED ON OR AFTER
OCTOBER 20, 1969)

To Avoid Delay—1. Read Information Carefully; 2. Complete Application in Full; 3. Repewrite or Print in Ink

A. IDENTIFYING INFORMATION

1. NAME (Last) (First) (Middle) Gale James Henry			2. LIST ALL OTHER NAMES YOU HAVE USED		
3. ADDRESS (Including ZIP code) 3307 Rocky Mount Road Fairfax, Virginia 22030			4. PHONE NUMBER (Including Area Code) 703-273-1661	5. DATE OF BIRTH (Month) (Day) (Year) 9-28-21	6. SOCIAL SECURITY ACCOUNT NUMBER 294 01 8383
7A. ARE YOU A CITIZEN OF THE UNITED STATES OF AMERICA? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO			7B. IF "NO", OF WHAT COUNTRY ARE YOU A CITIZEN?		
8A. ARE YOU MARRIED <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO			8B. IF "YES" GIVE THE FOLLOWING INFORMATION		
WIFE'S OR HUSBAND'S NAME (Last) (First) (Middle) [REDACTED]	HER (OR HIS) BIRTH DATE (Month) (Day) (Year) [REDACTED]	HER (OR HIS) SOCIAL SE- CURITY ACCOUNT NUMBER [REDACTED]	DATE OF MARRIAGE (Month) (Day) (Year) 3 - 22 - 52	PLACE OF MARRIAGE (City) (State) Cleveland, Ohio	MARRIAGE PERFORMED BY: <input checked="" type="checkbox"/> CLERGYMAN OR JUSTICE OF THE PEACE <input type="checkbox"/> OTHER (Specify)
9A. DO YOU HAVE ANY UNMARRIED CHILDREN UNDER AGE 22 (Or over age 22 and incapable of self support because of a disability incurred before age 18)? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO					
9B. IF "YES" LIST NAME AND DATE OF BIRTH OF EACH CHILD. WRITE THE WORD "DISABLED" AFTER CHILD'S NAME WHERE APPLICABLE					
CHILD'S NAME (First) (Middle) (Last)		DATE OF BIRTH (Mo.) (Day) (Yr.)		CHILD'S NAME (First) (Middle) (Last)	

B. CIVILIAN AND MILITARY SERVICE

1. DEPARTMENT OR AGENCY IN WHICH PRESENTLY OR LAST EMPLOYED, INCLUDING BUREAU OR DIVISION, AND ADDRESS, INCLUDING ZIP CODE Federal Bureau of Investigation Washington, D. C. 20535		2. DATE OF FINAL SEPARATION (Month) (Day) (Year) October 1, 1971	3. APPROXIMATE YEARS OF FEDERAL SERVICE CIVILIAN 30 MILITARY 1 1/2		
4. TITLE OF LAST POSITION Assistant Director					
5. DO YOU HAVE FEDERAL EMPLOYEES GROUP LIFE INSURANCE? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	6. IF YOU HAVE REGULAR LIFE INSURANCE, DO YOU ALSO HAVE OPTIONAL LIFE INSURANCE? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	7A. HAVE YOU BEEN ENROLLED IN A PLAN UNDER THE FEDERAL EMPLOYEES HEALTH BENEFITS PROGRAM SINCE YOUR FIRST OPPORTUNITY TO ENROLL OR FOR AT LEAST FIVE YEARS IMMEDIATELY BEFORE YOUR RETIREMENT? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	7B. IF "YES" PLEASE LIST YOUR CURRENT: CARRIER CONTROL NUMBER 3210032 ENROLLMENT CODE NUMBER 442		
8. COMPLETE THE SCHEDULE BELOW IF YOU HAVE PERFORMED ACTIVE DUTY THAT TERMINATED UNDER HONORABLE CONDITIONS IN ANY OF THE FOLLOWING SERVICES: (A) ARMY, NAVY, MARINE CORPS, AIR FORCE, OR COAST GUARD OF THE UNITED STATES; OR (B) REGULAR CORPS OR RESERVE CORPS OF THE PUBLIC HEALTH SERVICE AFTER JUNE 30, 1960; OR (C) AS A COMMISSIONED OFFICER OF THE COAST AND GEODETIC SURVEY AFTER JUNE 30, 1961; OR (D) AS A COMMISSIONED OFFICER OF THE ENVIRONMENTAL SCIENCE SERVICES ADMINISTRATION. ATTACH A COPY OF YOUR DISCHARGE CERTIFICATE OR OTHER CERTIFICATE OF ACTIVE MILITARY SERVICE, IF AVAILABLE.					
BRANCH OF SERVICE	SERIAL NUMBER	DATE OF ENTRANCE ON ACTIVE DUTY	DATE OF SEPARATION FROM ACTIVE DUTY	LAST GRADE OR RANK	ORGANIZATION AT DISCHARGE (Div., Regt., Co., etc.)
U. S. Navy	949-92-44	8/8/44	2/26/46	Specialist(Q) 2nd. class	Navy Radio Intelli- gence Unit
9A. ARE YOU A MILITARY RESERVIST (Either Active or Inactive)? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		9B. ARE YOU IN RECEIPT OF OR HAVE YOU EVER APPLIED FOR MILI- TARY RETIRED PAY? (Retired pay does not include V.A. pen- sion or compensation.) <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		9C. IF "YES" WERE YOU RETIRED FROM A RESERVE COMPONENT UNDER CHAPTER 67, TITLE 10, USC? (Formerly Title III, Public Law 80-810) <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	

C. DISABILITY INFORMATION (Only Applicants for Total Disability Retirement Will Complete This Part)

1. BRIEFLY DESCRIBE YOUR DISABILITIES. STATE WHEN OCCURRED, AND HOW THEY INTERFERE WITH PERFORMANCE OF THE DUTIES OF YOUR POSITION. (ATTACH
ADDITIONAL COMMENTS ON PLAIN SHEET OF PAPER, IF NECESSARY.) ALSO, STATE MONTH AND YEAR IN WHICH YOU BECAME TOTALLY DISABLED.

D. OTHER CLAIM INFORMATION

1A. HAVE YOU EVER RECEIVED OR MADE APPLICATION FOR COMPENSATION UNDER THE FEDERAL EMPLOYEES' COMPENSATION ACT? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	1B. IF "YES" STATE THE NUMBER OF YOUR COMPENSATION CLAIM AND THE PERIOD FOR WHICH YOU RECEIVED COMPENSATION: CLAIM NUMBER FROM (Mo.) (Day) (Year) TO (Mo.) (Day) (Year)
2A. HAVE YOU PREVIOUSLY FILED ANY APPLICATION UNDER THE CIVIL SERVICE RETIREMENT SYSTEM, INCLUDING APPLICATION FOR RETIREMENT, REFUND, DEPOSIT OR REDEPOSIT, OR VOLUNTARY CONTRIBUTIONS? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	2B. IF "YES" INDICATE THE TYPE(S) OF APPLICATION AND GIVE THE CLAIM NUMBER(S) IF KNOWN <input type="checkbox"/> RETIREMENT <input type="checkbox"/> DEPOSIT OR REDEPOSIT CLAIM NUMBER(S) <input type="checkbox"/> REFUND <input type="checkbox"/> VOLUNTARY CONTRIBUTIONS
3A. DO YOU HAVE LIFE INSURANCE THROUGH A FORMER EMPLOYEE BENEFICIAL ASSOCIATION FOR WHICH YOU NOW PAY PREMIUMS TO THE CIVIL SERVICE COMMISSION? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	3B. IF "YES" GIVE YOUR ACCOUNT NUMBER B
4A. HAVE YOU EVER BEEN EMPLOYED UNDER ANOTHER RETIREMENT SYSTEM FOR FEDERAL OR DISTRICT OF COLUMBIA EMPLOYEES? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	4B. IF "YES" GIVE THE NAME OF THE OTHER RETIREMENT SYSTEM

Original Sent to C:

INDICATE, BY SIGNING YOUR INITIALS IN THE APPROPRIATE BOX BELOW, THE TYPE OF ANNUITY YOU WANT TO RECEIVE. READ THE EXPLANATIONS AND CONSIDER THE MATTER CAREFULLY. NO CHANGE WILL BE PERMITTED AFTER AN ANNUITY HAS BEEN GRANTED. IF YOU WANT AN ANNUITY WITH A SURVIVOR BENEFIT, BE SURE TO GIVE THE OTHER INFORMATION CALLED FOR.

F. TYPES OF ANNUITY: MARRIED APPLICANTS ONLY

INITIALS 1. <u>SH</u>	ANNUITY WITH SURVIVOR BENEFIT TO WIDOW OR WIDOWER	<ul style="list-style-type: none">If you are married, you will receive this type of annuity unless you choose the annuity in F. 2.The annuity payable to you during your lifetime will be reduced by 2½% of any amount up to \$3,600 a year used as the base for the survivor benefit, plus 10% of any amount over \$3,600 so used.If your wife (or husband) should die before you, no change in type of annuity will be permitted, your annuity will not be increased, nor may you name any other person as survivor.The survivor's annuity will not begin until your death.
SPECIFY THE PORTION OF YOUR ANNUITY YOU WANT USED AS THE BASE FOR YOUR WIDOW'S (OR WIDOWER'S) SURVIVOR ANNUITY.		
<p>If you want all your annuity used as the base for the survivor benefit, write the word "all" in the box below. If you want only part of your annuity used as the base for the survivor benefit, write the yearly amount of your annuity you want used.</p>		
<p><u>\$ All</u></p>		
THE SURVIVOR'S ANNUITY WILL BE 55% OF ALL OR WHATEVER PORTION OF YOUR ANNUITY YOU SPECIFY AS THE BASE FOR HER (OR HIS) BENEFIT.		
INITIALS 2. <u> </u>	ANNUITY WITHOUT SURVIVOR BENEFIT (I do not desire my wife (or husband) to receive a survivor annuity benefit after my death.)	<ul style="list-style-type: none">If you choose this type, your wife (or husband) cannot be paid a survivor annuity after your death.This type provides annuity payments to you only.

G. TYPES OF ANNUITY: UNMARRIED APPLICANTS ONLY (Including Widowed and Divorced)

INITIALS 1. <u> </u>	ANNUITY WITHOUT SURVIVOR BENEFIT	<ul style="list-style-type: none">If you are not married, you will receive this type of annuity unless you choose the annuity in G. 2.This type provides annuity payments to you only.
INITIALS 2. <u> </u>	ANNUITY WITH SURVIVOR BENEFIT TO NAMED PERSON HAVING AN INSURABLE INTEREST	<ul style="list-style-type: none">This type is available to all retiring <i>unmarried</i> employees who are in good health.It provides a reduced annuity to you and a survivor annuity to the person named as having an insurable interest.The survivor's annuity will not begin until your death.The survivor's annuity will be 55% of the reduced annuity you receive.If you choose this type of annuity you will have to undergo a medical examination which will be arranged by the Civil Service Commission at no cost to you.If the person named as having an insurable interest should die before you, no change in type of annuity will be permitted, your annuity will not be increased, nor may you name any other person as survivor.
SPECIFY THE NAME, RELATIONSHIP, DATE OF BIRTH, AND SOCIAL SECURITY ACCOUNT NUMBER OF THE PERSON YOU WISH TO RECEIVE THE SURVIVOR ANNUITY		
NAME OF PERSON (First, middle, last)		
RELATIONSHIP		
DATE OF BIRTH (Mo., day, yr.)		
SOCIAL SECURITY ACCOUNT NUMBER		
SEE UNMARRIED EMPLOYEES UNDER INFORMATION REGARDING SURVIVOR ANNUITIES ON THE ATTACHED INFORMATION SHEET FOR EXPLANATION OF REDUCTION IN YOUR ANNUITY.		

H. CERTIFICATION OF APPLICANT

WARNING. —Any intentional false statement in this application or willful misrepresentation relative thereto is a violation of the law punishable by a fine of not more than \$10,000 or imprisonment of not more than 5 years, or both (18 U.S.C. 1001).	I hereby certify that all statements made in this application are true to the best of my knowledge and belief.
	8/24/71 (DATE) <u>James H. Gale</u> (SIGNATURE OF APPLICANT)

I. FOR USE OF EMPLOYING AGENCY (See FPM Supplement 831-1 for instructions.)

CHECK APPROPRIATE BOX:	
<input type="checkbox"/>	INDIVIDUAL RETIREMENT RECORD, SF 2806, AND REGISTER OF SEPARATIONS AND TRANSFERS, SF 2807, ARE ATTACHED.
<input type="checkbox"/>	INDIVIDUAL RETIREMENT RECORD, SF 2806, WAS SENT TO U.S. CIVIL SERVICE COMMISSION ON _____ (DATE) WITH REGISTER OF SEPARATIONS AND TRANSFERS, SF 2807, NO. _____
NAME OF AGENCY PERSON WHO CAN FURNISH ADDITIONAL INFORMATION ABOUT THIS APPLICATION, IF NECESSARY (Type or print)	SIGNATURE OF RESPONSIBLE AGENCY OFFICIAL
Maurice F. Row	<u>Maurice F. Row</u>
TELEPHONE NUMBER, INCLUDING AREA CODE	OFFICIAL TITLE
202 EX 3-7100 X635	Authorized Certifying Officer 8-27-71
	DEPARTMENT OR AGENCY
	Federal Bureau of Investigation

OFFENSES BARRING ANNUITY PAYMENTS: Title 5 USC 8312 prohibits payment of annuity to persons who have committed specified offenses involving the national security of the United States. Employing agencies are responsible for submitting all pertinent information to the Civil Service Commission's Bureau of Retirement, Insurance, and Occupational Health in any case when this law possibly applies.

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TRANSMITTAL OF MILITARY SERVICE DOCUMENTS

- ☒ The attached document(s) is/are furnished in reply to your recent request.
- ☐ A copy of the Report of Separation is not on file.
- ☐ Discharge certificates are prepared in the original only; therefore, copies cannot be furnished.
- ☐ A discharge certificate was previously mailed to you at your last known address. If you received that document, please return the enclosed certificate.
- ☐ The wallet size certificate of service is no longer issued or printed; therefore, a replacement cannot be furnished.
- ☐

MILITARY SERVICE DOCUMENTS ARE EXTREMELY IMPORTANT. GUARD THEM CAREFULLY AGAINST LOSS OR DAMAGE.

*James H. Dale
3307 Rocky Mt. Rd.
Fairfax, Va. 22030*

NATIONAL PERSONNEL RECORDS CENTER, GSA
(Military Personnel Records)
9700 Page Boulevard
St. Louis, Missouri 63132

HCP MAB

DATE: 6-17-71 CS

GENERAL SERVICES ADMINISTRATION

GSA FORM 6941 (REV. 4-71)

3/8

NOTICE OF SEPARATION FROM U. S. NAVAL SERVICE
NAVPERS-553 (REV. 8-45)

1. SERIAL FILE NO.		2. NAME (LAST) (FIRST) (MIDDLE)		3. RATE AND CLASS/GR		4. PLACE OF SEPARATION											
RANK AND CLASSIFICATION		PERMANENT ADDRESS FOR MAILING PURPOSES				3264											
949-92-44 GALE, James Henry Specialist (Q) 2c SV-6 USNR-TE				Shoemaker, California													
1251 Summit Avenue Lakewood (7) Ohio Cuyahoga County				5. CHARACTER OF SEPARATION Honorable													
				7. ADDRESS FROM WHICH EMPLOYMENT WILL BE SOUGHT Same as #4													
8. RACE W	9. SEX M	10. MARITAL STATUS Single	11. U.S. CITIZEN (YES OR NO) Yes	12. DATE AND PLACE OF BIRTH 9-28-21 Cleveland, Ohio													
13. REGISTERED <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		14. SELECTIVE SERVICE BOARD OF REGISTRATION #43 Lakewood, Ohio-Cuyahoga Co.		15. HOME ADDRESS AT TIME OF ENTRY INTO SERVICE Lakewood, Ohio													
16. MEANS OF ENTRY (INDICATE BY CHECK IN APPROPRIATE BOX) <input checked="" type="checkbox"/> ENLISTED <input checked="" type="checkbox"/> INDUCTED <input type="checkbox"/> COMMISSIONED DATE 8-8-44 DATE 8-8-44 DATE				17. DATE OF ENTRY INTO ACTIVE SERVICE 8-8-44		18. NET SERVICE (FOR PAY PURPOSES) (YRS., MOS., DAYS) 01-06-19											
				19. PLACE OF ENTRY INTO ACTIVE SERVICE NRS, Cleveland, Ohio													
20. QUALIFICATIONS, CERTIFICATES HELD, ETC. Specialist (Q) 2c: See Rating Description Booklet NAVPERS 15677				21. RATINGS HELD A.S. S2c, S1c Sp(Q)TE3c Sp(Q)TE2c		22. FOREIGN AND ON SEA SERVICE WORLD WAR II <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO											
23. SERVICE SCHOOLS COMPLETED NavBrks, Washington, D. C. (RadIntel)				24. SERVICE (VESSELS AND STATIONS SERVED ON) USNMC, Sampson, N. Y. (12 weeks) NavRadActivities, Port Blakely, Wash. Supp Radio Sta., Wahiwa, T. H. Joint Communications Act, Navy #926		25. WEEKS 4											
<p>IMPORTANT: IF PREMIUM IS NOT PAID WHEN DUE OR WITHIN THIRTY-ONE DAYS THEREAFTER, INSURANCE WILL LAPSE. MAKE CHECK OR MONEY ORDER PAYABLE TO THE TREASURER OF THE U. S. AND FORWARD TO COLLECTION & SUBDIVISION, VETERAN'S ADMINISTRATION, WASHINGTON 25, D. C.</p> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td>26. KIND OF INSURANCE NSI</td> <td>27. EFFECTIVE MONTH OF ALLOTMENT DISCONTINUANCE 2-1-45</td> <td>28. MO. NEXT PREMIUM DUE 3-46</td> <td>29. AMOUNT OF PREMIUM DUE EACH MONTH 20.00</td> <td>30. INTENTION OF VETERAN TO CONTINUE INS. Yes</td> </tr> <tr> <td>31. TOTAL PAYMENT UPON DISCHARGE \$ 432.38</td> <td>32. TRAVEL OR MILEAGE ALLOWANCE INCLUDED IN TOTAL PAYMENT \$ 130.45</td> <td colspan="3">33. INITIAL MUSTERING Paid</td> </tr> </table>								26. KIND OF INSURANCE NSI	27. EFFECTIVE MONTH OF ALLOTMENT DISCONTINUANCE 2-1-45	28. MO. NEXT PREMIUM DUE 3-46	29. AMOUNT OF PREMIUM DUE EACH MONTH 20.00	30. INTENTION OF VETERAN TO CONTINUE INS. Yes	31. TOTAL PAYMENT UPON DISCHARGE \$ 432.38	32. TRAVEL OR MILEAGE ALLOWANCE INCLUDED IN TOTAL PAYMENT \$ 130.45	33. INITIAL MUSTERING Paid		
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34. REMARKS Asiatic-Pacific American Area Victory Medal Point System				35. SIGNATURE (BY DIS) <i>E. J. Livinghouse</i> E. J. LIVINGHOUSE Lieutenant, (jg) USNR													
36. NAME AND ADDRESS OF LAST EMPLOYER F. B. I. Washington, D. C.				37. DATES OF LAST EMPL'NT. FROM 11-1939 TO 8-1944		38. MAIN CIVILIAN OCCUPATION AND D. O. T. NO. Investigator											
39. JOB PREFERENCE (LIST TYPE, LOCALITY, AND GENERAL AREA) Same as 36 & 38				40. PREFERENCE FOR ADDITIONAL TRAINING (TYPE OF TRAINING) None													
41. NON-SERVICE EDU. (YRS. SUCCESSFULLY COMPLETED) GRAM.: 8 H. S.: 4 COLL.: 5		42. DEGREES LLB		43. MAJOR COURSE OR FIELD Law		44. VOCATIONAL OR TRADE COURSES (NATURE AND LENGTH OF COURSE) None											
45. RIGHT INDEX FINGERPRINT		46. OFF DUTY EDUCATIONAL COURSES COMPLETED None															
		47. DATE OF SEPARATION 2-26-46		48. SIGNATURE OF PERSON BEING SEPARATED <i>James Henry Gale</i>													

TO: BUREAU OF NAVAL PERSONNEL

Original Sent to US

b6

3/ Ky

IN SUPPORT OF APPLICATION FOR CIVIL SERVICE RETIREMENT

GENERAL INSTRUCTION: Consult FPM Supplement 831-1, Retirement, for complete information on Civil Service Retirement.

A. IDENTIFICATION OF APPLICANT

B. INFORMATION CONCERNING ADDITIONAL CREDITABLE CIVILIAN SERVICE, IF ANY

3. IF ANSWER IN ITEM 2 IS YES, COMPLETE SCHEDULE BELOW TO SHOW SERVICE VERIFIED BY OFFICIAL DOCUMENTS IN PERSONNEL FOLDER, INCLUDING THE EFFECTIVE DATE AND RATE OF EACH PAY CHANGE. UNDER "REMARKS" SHOW ANY PERIOD OF LEAVE WITHOUT PAY, TIME ACTUALLY WORKED IF EMPLOYMENT WAS INTERMITTENT, OR TOUR OF DUTY IF EMPLOYMENT WAS PART TIME WITH A REGULAR TOUR OF DUTY.

EFFECTIVE DATE	ACTION	BASE PAY	FEDERAL AGENCY	RETIREMENT SYSTEM (If any)	REMARKS

1. IF APPLICANT CLAIMS RETIREMENT CREDIT FOR MILITARY SERVICE, IS A COPY OF OFFICIAL MILITARY DISCHARGE CERTIFICATE ATTACHED TO APPLICATION FOR RETIREMENT?

NOTE: A military discharge certificate submitted with application for retirement is acceptable only if it shows specific dates of active service and character of discharge.

IMPORTANT: SF 144, Statement of Prior Federal Civilian or Military Service, or comparable document containing applicant's unverified allegation of military service, is not acceptable for retirement purposes.

FROM	TO	BRANCH	CHARACTER OF DISCHARGE	TIME LOST, IF ANY
Military Furlough				

<p>3. IS APPLICANT IN RECEIPT OF MILITARY RETIRED PAY?</p> <p><input type="checkbox"/> Yes. Attach a copy of applicant's military retired pay order, <u>if available</u>.</p> <p><input type="checkbox"/> No.</p>	<p>4. IF YES, HAS APPLICANT-WAIVED MILITARY RETIRED PAY TO CREDIT MILITARY SERVICE FOR CIVIL SERVICE RETIREMENT? (See FPM Supplement 831-1, Retirement, Subchapter S3-5f.)</p> <p><input type="checkbox"/> Yes. Attach copy of military finance center letter to employee accepting waiver, <u>if available</u>.</p> <p><input type="checkbox"/> No. (Includes cases where waiver unnecessary)</p>
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• ALSO COMPLETE AND CERTIFY OTHER SIDE OF THIS FORM

Original Sent to CSC

D. TYPE OF IMMEDIATE RETIREMENT

1. <input type="checkbox"/> AGE	• Enter date that notice of mandatory separation was given to employee _____ (date)
2. <input checked="" type="checkbox"/> OPTIONAL (Voluntary)	• If retirement is under special provision for law enforcement employees, <u>attach</u> agency head's recommendation.
3. <input type="checkbox"/> DISCONTINUED SERVICE	• <u>Attach</u> certified summary of events leading to separation and copies of all relevant documents exchanged with employee.
4. <input type="checkbox"/> DISABILITY	• Prepare two copies of SF 2801-C, transmittal of medical documents, according to instructions on SF 2801-C. • <u>Attach</u> Duplicate copy of SF 2801-C to this form for submission with application for retirement, SF 2801. • Send <u>Original</u> copy of SF 2801-C with medical documents to civil service commission office having medical jurisdiction over disability retirement from the applicant's place of employment.

E. FEDERAL EMPLOYEES GROUP LIFE INSURANCE AND HEALTH BENEFITS STATUS

1. IS APPLICANT ELIGIBLE TO CONTINUE GROUP LIFE INSURANCE COVERAGE DURING RETIREMENT? (See Federal Personnel Manual supplement 870-1, Life Insurance, subchapter S6, for detailed instructions)	
<input checked="" type="checkbox"/> YES. Enter following information below: <input checked="" type="checkbox"/> Eligible to continue regular insurance only. <input type="checkbox"/> Eligible to continue regular plus optional insurance; continuous optional insurance coverage since: <div style="text-align: center;">3-2-70</div> <i>(Insert date of most recent SF 176, Election, Declination, or Waiver of life insurance coverage)</i>	<input type="checkbox"/> NO. Give reason below: <input type="checkbox"/> Less than 12 years service for life insurance purposes and retirement not for disability. <input type="checkbox"/> Waived all life insurance coverage. <input type="checkbox"/> Not eligible for life insurance. <input type="checkbox"/> Other (specify)
2. IS APPLICANT ELIGIBLE TO CONTINUE FEDERAL EMPLOYEES HEALTH BENEFITS ENROLLMENT DURING RETIREMENT? (See Federal Personnel Manual supplement 890-1, health benefits, subchapter S14, for detailed instructions)	
<input checked="" type="checkbox"/> YES. Enter following information: <div style="text-align: center;">442</div> <div style="text-align: center;">Enrollment Code Number</div> <div style="text-align: center;">3210032</div> <div style="text-align: center;">Carrier Control Number</div>	<input type="checkbox"/> NO. Give reason below: <input type="checkbox"/> Less than 12 years service for health benefits purposes and retirement not for disability. <input type="checkbox"/> Not enrolled since first opportunity or for 5 years of service immediately before retirement, whichever is less. <input type="checkbox"/> Not enrolled for health benefits. <input type="checkbox"/> Other (specify)
3. DOCUMENTATION: If employee is eligible to continue life insurance coverage and/or health benefits enrollment during retirement, determine which of the two procedures below will be followed in submitting SF 2801, Application for Retirement. After life insurance <u>and/or</u> health benefits actions have been taken, check appropriate box(es) below.	
PROCEDURE 1: AGE, OPTIONAL, OR DISCONTINUED SERVICE RETIREMENT SF 2801 (Application for Retirement) and SF 2806 (Individual Retirement Record) will be submitted <u>after</u> separation for retirement. LIFE INSURANCE DOCUMENTATION <input type="checkbox"/> Applicant eligible for continued life insurance coverage. Upon separation <u>attach</u> original copy of SF 56 (Agency Certification of Insurance Status) NOTE: Carefully observe instructions on SF 56 for attaching SF 54, Designation of Beneficiary if current SF 54 is on file in personnel folder. HEALTH BENEFITS DOCUMENTATION <input type="checkbox"/> Applicant eligible for continued health benefits enrollment. Upon separation <u>attach</u> personnel folder copy of SF 2810 (Transferring enrollment to Civil Service Retirement System) and all personnel folder copies of SF 2809 and SF 2810 together with any medical certificates.	PROCEDURE 2: DISABILITY RETIREMENT OR LAW ENFORCEMENT EMPLOYEE SF 2801 (Application for Retirement) and SF 2806 (Preliminary Retirement Record) will be submitted for approval <u>before</u> separation for retirement. LIFE INSURANCE DOCUMENTATION <input checked="" type="checkbox"/> Applicant eligible for continued life insurance coverage. Establish follow up to assure that original copy of SF 56 (Agency Certification of Insurance Status) and any current SF 54 (Designation of Beneficiary) will be attached to final SF 2806 (Individual Retirement Record) when submitted <u>after</u> separation for retirement. HEALTH BENEFITS DOCUMENTATION <input checked="" type="checkbox"/> Applicant eligible for continued health benefits enrollment. Establish follow up to assure that personnel folder copy of SF 2810 (Transferring enrollment to Civil Service Retirement System) and <u>all</u> personnel folder copies of SF 2809 and SF 2810 together with any medical certificates are attached to <u>final</u> SF 2806, when submitted <u>after</u> separation for retirement.

F. INSTRUCTIONS TO AGENCY PAYROLL OFFICE

1. Verify that life insurance and health benefits status as shown on this form are consistent with payroll records.
2. Be sure to post unused sick leave and confirmed pay status remarks on certified SF 2806, Individual Retirement Record.
3. Submit SF 2801, Application for Retirement, together with certified SF 2806, Individual Retirement Record, and required attachments, to the U.S. Civil Service Commission, Bureau of Retirement, Insurance, and Occupational Health, Washington, D.C. 20415, within time limits prescribed in FPM Supplement 831-1, Subchapter S22.

G. AGENCY EMPLOYING OFFICE CERTIFICATION

I certify that the information contained on this form accurately reflects official personnel records in the custody of this agency.	
SIGNATURE OF AUTHORIZED AGENCY PERSONNEL OFFICIAL <i>Harold N. Barrett</i>	
OFFICIAL TITLE Personnel Officer	DATE 8-24-71
AGENCY NAME AND ADDRESS, INCLUDING ZIP CODE, AND TELEPHONE NUMBER, INCLUDING AREA CODE FBI 9th St. and Penn. Ave., N.W. Washington, D. C. 20535	

POWER OF ATTORNEY BY INDIVIDUAL TO A BANK FOR THE COLLECTION OF CHECKS DRAWN ON THE
TREASURER OF THE UNITED STATES

KNOW ALL MEN BY THESE PRESENTS:

That the undersigned, James H. Gale, of
3307 Rocky Mount Road, Fairfax, Virginia 22030, does hereby appoint
(Post-office address)
American Security and Trust Co., Federal Triangle Office
(A responsible banking institution or trust company must be named)
of 1111 Pennsylvania Avenue, N. W., Washington, DC, as his attorney to receive, endorse,
(Post-office address)
and collect checks payable to the order of the undersigned, drawn on the Treasurer of the United States
and issued for retirement annuity
(State purpose for which checks are issued)
dated from November 2, 1971, to November 2, 1972, and to give full
(Time not to exceed 12 months)
discharge for same, hereby ratifying and confirming all that said attorney shall lawfully do by virtue
hereof. This power of attorney is not given to carry into effect an assignment to the attorney, or to any
other person, of the right of the undersigned to receive the above-described payments.

WITNESS the signature and seal of the undersigned, this 27th day of August, 1971
James H. Gale [SEAL]
(Signature of grantor)

Personally appeared before me the above-named James H. Gale
known or proved to me to be the same person who executed the foregoing instrument, and acknowledged
to me that he executed the same as his free act and deed.

WITNESS my signature, official designation, and seal.

Louise D. Walter
(Signature of attesting officer)

[IMPRESS SEAL HERE]

LOUISE D. WALTER
MY COMMISSION EXPIRES AUG. 14, 1973

Notary Public
(Official designation)

Dated at Washington, DC this 27th day of August, 1971

My commission expires 1 + 14, 1973

IMPORTANT.—Do not execute this instrument without first reading the instructions on the reverse side hereof. Exact
compliance with these instructions will avoid complications.

Office No. 14 Account No. 315 DSC of TOS 6711-10
82 406 Account Name James H. Gale

3/25

INSTRUCTIONS—READ CAREFULLY

1. A power of attorney on this form may be executed as authority for the endorsement and collection of checks drawn on the Treasurer of the United States. This power of attorney must name a responsible banking institution or trust company as attorney, must be limited in duration to a specified 12-month period, and must recite that it is not given to carry into effect an assignment to the attorney, or to any other person, of the right to receive the payments therein described.

2. If the signature of the grantor is made by mark, it should be witnessed by at least one person who can write, other than the acknowledging officer, giving his place of residence in full.

3 (a). This power of attorney should be acknowledged before a notary public or other officer authorized by law to administer oaths generally. If in a foreign country, the acknowledgment should be made before a United States diplomatic or consular representative. If such an officer is not available, it may be acknowledged before a notary or other officer authorized to administer oaths, but his official character and jurisdiction must be certified by a United States diplomatic or consular officer, under the seal of his office.

3 (b). Seals of attesting officers must always be impressed; provided, however, that where acknowledgments before a notary public, or other officer authorized by law to administer oaths, are not thus authenticated by the official impression seal of such officer, the power should be accompanied by a certificate from the proper official showing that the officer was in commission on the date of the acknowledgment. The date when the officer's commission expires should appear in any event. If a certificate is furnished, such certificate should show the dates of the beginning and expiration of the officer's commission, and such period of commission should include the date of acknowledgment of the power.

3 (c). Notwithstanding the foregoing, persons subject to military jurisdiction may acknowledge powers of attorney before officers specially designated for that purpose pursuant to law.

4. This power of attorney is revoked by the death of the grantor and may also be revoked by notice from the grantor to the parties concerned. Notice of revocation to the Treasury will not ordinarily serve to revoke the power.

5. If it is desired that checks be mailed to the attorney instead of to the payee, formal notice of change in the post-office address, identifying the checks affected, should be forwarded to the administrative office which authorized issuance of the checks.

6. POWERS OF ATTORNEY NEED NOT BE FILED WITH THE TREASURER OF THE UNITED STATES.

3/R₂

NOTIFICATION OF PERSONNEL ACTION

(FOR AGENCY USE)

1. NAME (CAPS), LAST—FIRST—MIDDLE GALE, JAMES H.		MR.—MISS—MRS. (MR.)	2. (FOR AGENCY USE)	3. BIRTH DATE (Mo., Day, Year) 9-28-21	4. SOCIAL SECURITY NO. 294-01-8383
5. VETERAN PREFERENCE 2 1—NO 3—10 PT. DISAB. 5—10 PT. OTHER 2—5 PT. 4—10 PT. COMP.			6. TENURE GROUP	7. SERVICE COMP. DATE	
9. FEGLI 4 1—COVERED (Regular only—declined Optional) 2—INELIGIBLE 3—WAIVED 4—COVERED (Reg. & Opt.)			10. RETIREMENT 1 1—CS 3—FS 5—OTHER 2—FICA 4—NONE		11. (FOR CSC USE)
12. CODE NATURE OF ACTION RETIREMENT (20 YEARS INVESTIGATIVE EXPERIENCE)			13. EFFECTIVE DATE (Mo., Day, Year) cb 10-1-71		14. CIVIL SERVICE OR OTHER LEGAL AUTHORITY
15. FROM: POSITION TITLE AND NUMBER Assistant Director 110			16. PAY PLAN AND OCCUPATION CODE GS		17. (a) GRADE OR LEVEL (b) STEP OR RATE 18 1
					18. SALARY \$36,000 pa
19. NAME AND LOCATION OF EMPLOYING OFFICE					

20. TO: POSITION TITLE AND NUMBER		21. PAY PLAN AND OCCUPATION CODE	22. (a) GRADE OR LEVEL (b) STEP OR RATE	23. SALARY
24. NAME AND LOCATION OF EMPLOYING OFFICE				

25. DUTY STATION (City—county—State)			26. LOCATION CODE	
27. APPROPRIATION S. & E., FBI		28. POSITION OCCUPIED 1—COMPETITIVE SERVICE 2 2—EXCEPTED SERVICE	29. APPORTIONED POSITION FROM: TO: STATE 1—PROVED-1 2—WAIVED-2	

30. REMARKS. ☐ A. SUBJECT TO COMPLETION OF 1 YEAR PROBATIONARY (OR TRIAL) PERIOD COMMENCING _____
☐ B. SERVICE COUNTING TOWARD CAREER (OR PERMANENT) TENURE FROM: _____

SEPARATIONS: SHOW REASONS BELOW, AS REQUIRED CHECK IF APPLICABLE: ☐ C. DURING PROBATION

At his request, he voluntarily retired in view of Section 8336(c) 5 USC of the Civil Service Retirement Act. Annuity payments to commence 10-2-71. Employee stated he was retiring to devote more time to his responsibilities as a father and as a husband. Forwarding Address: 3307 Rocky Mount Road Fairfax, Virginia 22030

**Paid hereon for the period 9-5-71 thru cb 10-1-71. lump-sum pmt. to cover 508 hrs. commencing bob 10-4-71 and ending after 4 hrs. on 12-30-71. 4 holidays included.
R 160 LSP 508**

31. DATE OF APPOINTMENT AFFIDAVIT (Accessions only) 67-NOV 1967		34. SIGNATURE (Or other authentication) AND TITLE E. Hoover Director	
32. OFFICE MAINTAINING PERSONNEL FOLDER (If different from employing office) 15 OCT 1971		35. DATE 9-17-71	
33. CODE EMPLOYING DEPARTMENT OR AGENCY DJ 02 FEDERAL BUREAU OF INVESTIGATION WASHINGTON D C 20535			

3 1/2

RECEIPT FOR GOVERNMENT PROPERTY
FEDERAL BUREAU OF INVESTIGATION
UNITED STATES DEPARTMENT OF JUSTICE

Date 9-1-71

I certify that I have ☐ received ☒ returned the following Government property for official use:

- ✓ Badge with Case, No. 2622 to be mounted and presented to Mr. Gale
- ✓ Commission Card with Case No. 33
- ✓ Manual of Rules and Regulations No. 47
- ✓ Manual of Instructions No. 176
- ✓ Agents Brief Case
- ✓ Colt Official Police Revolver No. 708409
- ✓ O.P. Hip Holster
- ✓ Adapter
- ✓ FBI Handbook No. 1021
- ✓ Inspectors' Manual (Field) #552
- *+ USDJ Parking Permit Garage Space 11
- ✓ Master Key-Fifth Floor
- ✓ Inspectors' Manual (SOG) #13
- ✓ FBI Identification Card 01144
- * Time and Attendance Manual #314
- * Defense Plans Manual #139
- * Position Classification Manual #67
- * First Floor Master Key (tel-key cabinet)
- * Seventh Floor Master Key (tel-key cabinet)
- * Key to Room 1712 (tel-key cabinet)
- ✓ Handbook of Technical Equipment Synopsis #ES-2
- ✓ D.C. Official Parking Permit #6277
- * Inspectors' Manual, Foreign Offices #13
- ✓ GTRs - A 3993485-500 *any*
- ✓ FBIRA Card

* To Mr. Cleveland

** To Mr. Stafford

READ

The Government property which you hereby acknowledge is charged to you and you are responsible for taking care of it and returning it when its use has been completed.

DO NOT MARK OR WRITE ON IT OR MUTILATE IT IN ANY WAY.

Very truly yours,

(Signature)

(Typed name)

James H. Gale

9 OCT 1 1971

FOR THE PERSONNEL FILE OF JAMES H. GALE

GALE, JAMES H.

(20)

<u>DATE</u>	<u>CHOLESTEROL</u>	<u>TRIGLYCERIDE</u>	<u>BETA LIPO</u>	<u>FASTING</u>
2-15-68	262	1.64		yes
5-16-68	262	2.40		yes
8-22-68	262	3.80		Breakfast - Cereal, milk & juice
11-21-68	276	2.50		Cereal, milk & juice
3-20-69	238	3.36		Cereal, milk, juice
3/19/70	275	3.54		Cereal, milk, juice
7/23/70	(did not participate)			
10/22/70	226	2.57		Cereal, juice
1/21/71	251	3.25		yes
5/20/71	250	2.53		1 glass tomato juice (3 hrs prior to test).
8/19/71	Did not participate			

1 SEP 16 1971

38

3
vte

UNITED STATES GOVERNMENT

Memorandum

TO : Mr. Felt *7*

DATE: 1/25/72

FROM : T. E. Bishop *TEB*

SUBJECT: RETIRED ASSISTANT DIRECTOR
JAMES H. GALE

Tolson	<input checked="" type="checkbox"/>
Felt	<input checked="" type="checkbox"/>
Rosen	<input checked="" type="checkbox"/>
Mohr	<input checked="" type="checkbox"/>
Bishop	<input checked="" type="checkbox"/>
Mittler, C.S.	<input checked="" type="checkbox"/>
Callahan	<input checked="" type="checkbox"/>
Casper	<input checked="" type="checkbox"/>
Conrad	<input checked="" type="checkbox"/>
Dalbey	<input checked="" type="checkbox"/>
Cleveland	<input checked="" type="checkbox"/>
Ponder	<input checked="" type="checkbox"/>
Bates	<input checked="" type="checkbox"/>
Waikart	<input checked="" type="checkbox"/>
Walters	<input checked="" type="checkbox"/>
Soyars	<input checked="" type="checkbox"/>
Tele. Room	<input checked="" type="checkbox"/>
Holmes	<input checked="" type="checkbox"/>
Gandy	<input checked="" type="checkbox"/>

I talked to former Assistant Director James H. Gale today and he advised me that the Republican National Committee has moved him up to the position of Executive Assistant to the Republican National Committeeman, Richard Herman, a trucking company owner from Nebraska, who is in charge of the forthcoming Republican National Convention in San Diego. Mr. Gale now occupies the Number Two spot.

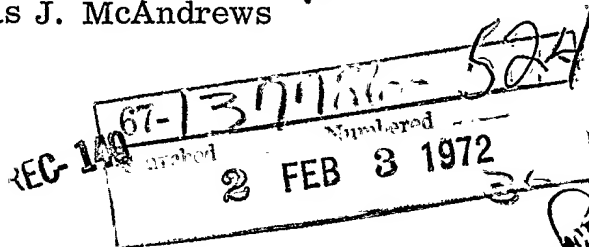
Former Inspector Thomas J. McAndrews, who is now living in Naples, Florida, has agreed to handle the security responsibilities for the forthcoming Republican Convention. These responsibilities were previously being handled by Mr. Gale. Both Mr. McAndrews and Mr. Gale wanted the Director to know of these developments.

RECOMMENDATION

None. For information.

- 1 - Mr. Mohr
- 1 - Mr. Bishop
- 1 - Mr. Callahan
- 1 - Personnel File of Thomas J. McAndrews

TEB:asg
(5)



7 FEB 7 1972

COPY MADE FOR MR. TOLSON

DUPLICATE PROPERTY RECORD

(This record is to be kept up-to-date and should be maintained
in the field personnel file of the special agent.)

NAME James H. Gale

Badge # 5094, with case
Commission Card with case, # 5449
Manual of Rules and Regulations # 8217
Manual of Instructions # 8217
National Defense Manual # 8217
Tax Exemption Identification Card # J6779
Agents Brief Case x
Zipper Brief Case x
Seat of Government Building Pass # _____
G.T.R. Identification Card # _____
Chief Clerk's Manual # _____
~~Gas Mask~~ x
~~Helmet~~ x

~~Personal Identification Badge~~ 4-22

FIREARMS:

Official Police Revolver # 725502
Official Police Hip Holster x
Grip Adapter x

REMOVED FROM
PERSONNEL FILE
67 - NOT RECORDED
DEC 23 1971

66-1067

FEB 11 1944

ROUTED

INVESTIGATION
OF OFFICE

OCT 28 1943

ROUTED TO

FILE

FIELD FIREARMS TRAINING RECORD

SPECIAL AGENT

James H. Galt

FD-40
3-25-47

OFFICE	MO. YR.	DA MS	PPC	SG	.30	MG	GAS	RD	30 Round	Bulls Eye	QUALI- FIED
Anchorage	1/52									✓	
	2/52									✓	
	3/52									✓	
	4/52				90	92				✓	
	5/52	96	94	#2		96					DT
	6/52	100	96			92					
	7/52	100	95	#2		92					DT
	8/52	100	96	#1							DT
	9/52	100	96			100					
	11/52								✓		
	2/53								✓		
	3/53								✓		
Minneapolis	4/53	98	95	100	94	98					
	7/53	98	99	#2		96					
	10/53	98	99	#2	70	92					
	12/53								✓		
	2/54								✓		
	3/54								✓		
	4/54	98	99			80					
	5/54	94	99	0		98					
	7/54	96	99.6	8		100					
	10/54	96	96	100		98					
	12/54								✓		
	1/55								✓		
	2/55								✓		

Galt

Field Firearms Training Record
FD-40 (Rev. 12-11-59)

Special Agent Gale, James H.

Current thru 1964

[illegible]

DUPLICATE PROPERTY RECORD

(This record is to be kept up to date)

NAME GALE, JAMES H.

- ✓ Bureau Badge with case No. 2622 ✓
- ✓ Commission Card with case No. 33 ✓
- ✓ FBI Handbook No. 1021 ✓
- ✓ Agent's Brief Case x ✓ / Zipper Brief Case x ✓
- ✓ GTR's No. A 3940976 thru 980 ✓ *used A 3862 141-150*
- ✓ ~~Official Parking Permit~~ *Exp 6/30/1961 kept at home 70 11-17-60*
- ✓ Inspector's Manual #~~293~~ 552 (9-18-59) ✓

FBI Identification Card No. _____

Credential Card (Non-Agent) No. _____

U. S. Government Operator's
Identification Card No. _____FIREARMS:

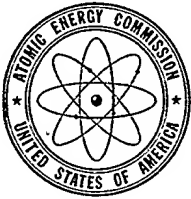
- ✓ Colt Official Police Revolver No. 708409 ✓
- ✓ Hip Holster and adapter for above x
- S & W Military & Police Revolver No. _____
- Hip Holster and adapter for above _____

REMOVED FROM FIELDPERSONNEL FILE67 - NOT RECORDED

DEC 23 1971

VERIFICATIONS

[illegible]



UNITED STATES
ATOMIC ENERGY COMMISSION
CHICAGO OPERATIONS OFFICE
9800 SOUTH CASS AVENUE
ARGONNE, ILLINOIS

December 8, 1961

Mr. James H. Gale
Special Agent in Charge
U. S. Department of Justice
Federal Bureau of Investigation
536 South Clark Street - Room 900
Chicago 5, Illinois

Dear Mr. Gale:

I wish to thank you for your presentation on the occasion of our recent security conference in Chicago.

Your remarks were enlightening to me, and I have been given reason to believe that they were enjoyed and appreciated as thoroughly by the others there as by myself.

I am most grateful to you for giving of your valuable time to our special interests. If there should come a time when I can in some way repay you for your kindness, please let me know. Thank you again for your very fine contribution to the success of our conference.

Sincerely yours,

C. C. McSwain, Director
Security Division

67 - 111

DEC 12 1961

SEARCHED.....	INDEXED.....
SERIALIZED.....	FILED.....
DEC 12 1961	
FBI - CHICAGO	

*Personal file
SAC Gale*

ASSOCIATION OF AMERICAN RAILROADS

.88140.

OPERATIONS AND MAINTENANCE DEPARTMENT OPERATING-TRANSPORTATION DIVISION

C. D. BUFORD, VICE-PRESIDENT,
OPERATIONS AND MAINTENANCE DEPARTMENT

59 EAST VAN BUREN STREET
CHICAGO 5, ILLINOIS

OFFICERS OF DIVISION

C. R. TUCKER, CHAIRMAN
J. F. NASH, VICE-CHAIRMAN
C. A. LAUBY, EXECUTIVE VICE-CHAIRMAN
W. E. TODD, STAFF SECRETARY
F. J. PARKER, ASST. STAFF SECRETARY

October 27, 1961

File: P-10-11

The Honorable J. Edgar Hoover, Director
Federal Bureau of Investigation
United States Department of Justice
Washington 25, D. C.

Dear Mr. Hoover:

At this time I would like to acknowledge on behalf of the Police Advisory Committee, Association of American Railroads, the fine assistance rendered by a number of your representatives in connection with the Eleventh Session of the International Railroad Police Academy, conducted in the Illinois Central Railroad Station, Chicago, Illinois, September 18-29, 1961.

Mr. James H. Gale, Special Agent in Charge, Mr. James L. Handley, Assistant Special Agent in Charge and Special Agents Robert Andersen, [redacted] Raymond A. Driscoll, [redacted] A. D. Mehegan and John Quinlan, through their participation in this program contributed a great deal to its success. This expert assistance was very much appreciated and reflects the close working relationship between the Bureau, Local Law Enforcement Agencies and the Railroad Police. Please accept our most sincere thanks for the assistance provided by yourself through the Chicago office of the Bureau.

If at any time this office can be of assistance to you please do not hesitate to call on us.

Respectfully yours,

[redacted]

Staff Secretary

rlr

BC-Mecars.

D. L. Wood

J. H. Gale

J. L. Handley

Robert Andersen

Raymond A. Driscoll

John Quinlan

A. D. Mehegan

REMOVED FROM
PERSONAL
67 - NOT RECORDED
DEC 25 1961

cc's placed in appropriate personnel files

SEARCHED	INDEXED
SERIALIZED	FILED
OCT 30 1961	
FBI - CHICAGO	

Gale's personal file 67-16441

November 21, 1960

Colonel John W. Gaffney, USAF
Commander
4th District Office of Special Investigations
Department of the Air Force
Bolling Air Force Base 25, D. C.

Dear Colonel:

Your letter regarding Mr. James H. Gale, former Special Agent in Charge of our Washington Field Office, was received on November 16, 1960.

It is always a source of encouragement to receive such generous comments regarding my associates, and I know Mr. Gale will appreciate your kind remarks. You may be sure that representatives of our Washington Field Office and Mr. Gale have enjoyed working with you, and we are looking forward to a continuation of this splendid relationship. Please do not hesitate to call on us whenever we can be of service.

Sincerely yours,

J. Edgar Hoover

- 1 - Washington Field Office - Enclosure
① - Chicago - Enclosure

*Please file in my
Personal files.
JHG*

SEARCHED.....
SERIALIZED.....
NOV 2 1960
FBI - CHICAGO

67-16441-6

DEPARTMENT OF THE AIR FORCE
HEADQUARTERS UNITED STATES AIR FORCE
THE INSPECTOR GENERAL USAF
4th DISTRICT OFFICE OF SPECIAL INVESTIGATIONS
BOLLING AIR FORCE BASE 25, D.C.

Honorable J. Edgar Hoover
Director
Federal Bureau of Investigations
Department of Justice
Washington 25, D. C.

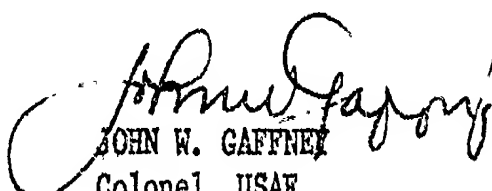
Dear Mr. Hoover:

The staff of this District Office wishes to bring to your attention the fine relationship that has existed between the Washington Field Office and this District Office during the tenure of Special Agent in Charge, Mr. James H. Gale.

Although I have only been assigned to this District for a short time, the staff speaks highly of the relationship that exists with the Washington Field Office due primarily to the affable personality of Mr. Gale and his efforts to always be of assistance to all the agents who have had problems in the past.

We are sure this relationship will continue and we are pleased to welcome Mr. Marlin W. Johnson.

Sincerely


JOHN W. GAFFNEY
Colonel, USAF
Commander



67-16441-5

FIELD FIREARMS AND SCIENTIFIC TRAINING RECORD

FD-39

OF SPECIAL AGENT

James H. Gale

OFFICE	MO YR	H. S.	P. P. C.	S. G.	.30	M. G.	GAS	NIGHT	MAGNUM	MO. PIST. PRACTICE	F. P.	LAT.	S. G. C.	G. M.	R. & P.	M. P. C.	M. P. P.	REC.	PHO. REC.	F. M. RADIO	DET.	P. M.	R. D.	EST. EFF.
In New	4																							
Eng	46	96	84	100	81	75																		
Cleveland	5																							
"	46	86	77		75																			
"	6																							
"	46	86	89	100		93																		
"	7																							
"	46	86	91		83																			
"	8																							
"	46	86	92	92		100																		
"	9																							
"	46																							
"	10																							
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"	47																							
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"	47																							
"	3																							
"	47																							
"	5																							
"	47	86	93		78																			
"	6																							
"	47	86	92	100		93																		

REMOVED FROM FIELD
PERSON

DEC 26 1971

FEDERAL BUREAU OF INVESTIGATION U. S. DEPARTMENT OF JUSTICE	
JUN 5 1947	
CLEVELAND, OHIO FIELD OFFICE	ROUTED TO

67-442-35

United States Department of Justice

UNITED STATES ATTORNEY

CLEVELAND 14, OHIO

June 13, 1947

Mr. E. C. Richardson,
Special Agent in Charge,
Federal Bureau of Investigation,
Standard Bldg.,
Cleveland, Ohio

In re: James H. Gale, Special Agent

Dear Mr. Richardson:

With the return of a "No-Bill" in the James Spencer White Slave case, we have almost completed the matters for prosecution under the investigations of Agent Gale.

Since for various reasons no prosecutions have resulted in this district, although they have been very helpful to the Pittsburgh district, I think it incumbent upon me to comment on Agent Gale's work.

In the intricate and protracted investigation which he made, he was always alert to the needs our office would have had in the way of evidence. In obtaining that evidence he did a very excellent job from our viewpoint. I know how hard he worked to make a successful investigation as to all the subjects, and by this letter wish to express my appreciation of his attitude and service.

Very truly yours,

Don C. Miller,
United States Attorney,

By: *Lester P. Kauffmann*
Lester P. Kauffmann,
Asst. U. S. Attorney.

REMOVED FROM FILE
JUN 14 1947

LPK:wl

67-442-36

Chas. file

900 Standard Building
Cleveland, Ohio

June 17, 1947

Mr. Lester P. Kauffmann
Assistant United States Attorney
Federal Building
Cleveland 14, Ohio

Re: SPECIAL AGENT JAMES H. GALE

Dear Mr. Kauffmann:

Thank you for your letter of June 13, 1947 in regard to the White Slave cases investigated by the above-named agent.

It was thoughtful of you to write as you did and I do appreciate the things you had to say with reference to the performance of Agent Gale. We always stand ready to be of assistance to you and shall always appreciate any suggestions that you may have to make with reference to any of the cases within your jurisdiction.

With kindest personal regards, I am

Sincerely yours,


E. C. Richardson
Special Agent in Charge

ECR:UC

67-772-17

RAILWAY EXPRESS AGENCY
2436 Bagley Avenue
DETROIT 16, MICH.

PERSONAL

April 19, 1949

Mr. R. J. Abbaticchio
Special Agent in Charge
Federal Bureau of Investigation
900 Standard Building
Cleveland 13, Ohio

RE: John L. Gergel
Jesse Warren Bauer

Dear Mr. Abbaticchio:

I believe that you will recall the interest shown in this case by our Manager, Mr. [] as indicated by Superintendent E. C. Berry in our conversations at Cleveland, Ohio on March 8, 1949.

I have advised Mr. [] by telephone of your success in the prosecution, convictions and sentence of the above subjects, and he has requested that I express to you and your staff, his thanks and appreciation for the excellent work done in this case.

b6

I personally know of the difficulties encountered at Cleveland and Painesville, Ohio in developing sufficient evidence to convict the subjects, and I congratulate Mr. [] and his associates, Messrs Gale and Smith on the efficient manner of developing the evidence in the case, and the orderly manner in which the evidence was submitted to the Judge and Jury.

I would also like to express my thanks and appreciation for the cooperation extended to our Bureau in this case.

Yours very truly,

ORIGINAL SIGNED
O. L. WHEELER

Chief Special Agent.

OLW:ts

J. H. [unclear]

67-442-28

MEDICAL REPORTS

Personnel File of: Gole, James H.

Personnel File No. _____



(26)

3/10/57

NOT A REPORT

CLINICAL RECORD		ELECTROCARDIOGRAPHIC RECORD				PREVIOUS ECG <input checked="" type="checkbox"/> YES ¹⁹⁶⁵ <input type="checkbox"/> NO	
CLINICAL IMPRESSION				MEDICATION		<input type="checkbox"/> EMERGENCY <input checked="" type="checkbox"/> ROUTINE	<input type="checkbox"/> BEDSIDE <input checked="" type="checkbox"/> AMBULANT
AGE	SEX	RACE	HEIGHT	WEIGHT	B. P.	SIGNATURE	DATE
46	M	cauc	72"	184		DR.	12-18-67
RHYTHM				AXIS DEVIATION (QRS)		RATES AURIC. VENT.	
INTERVALS PR QRS QT				P WAVES			
QRS COMPLEXES							
RS-T SEGMENT				T WAVES			
UNIPOLAR EXTREMITY LEADS (Specify)							

PRECORDIAL LEADS (Specify)

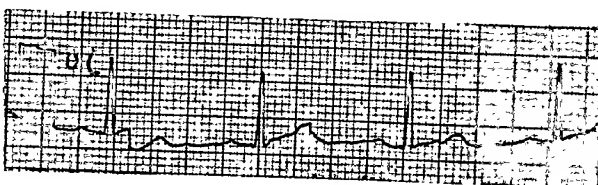
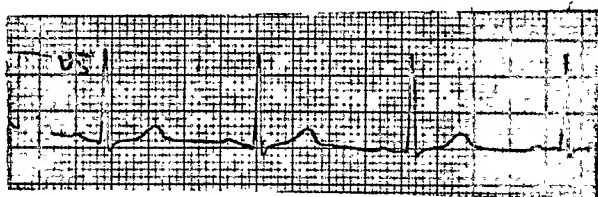
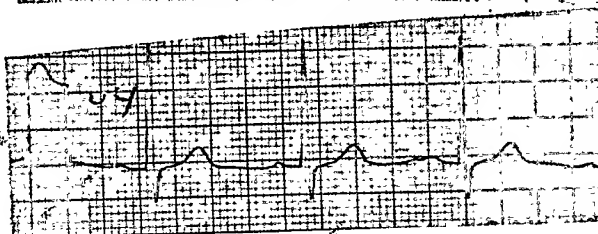
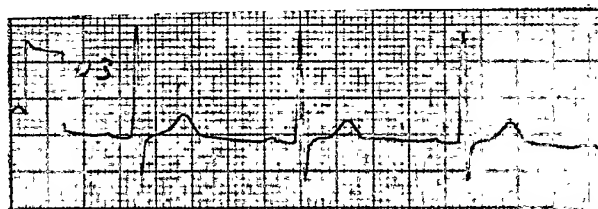
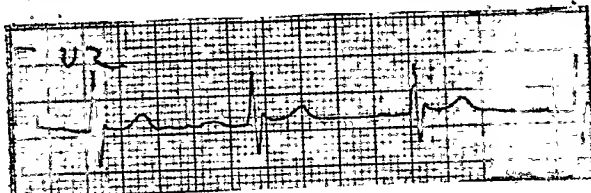
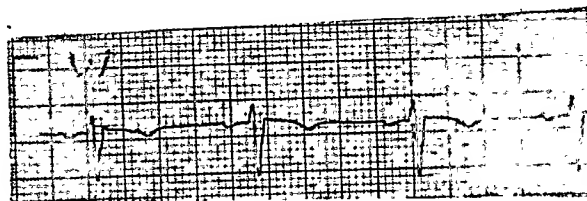
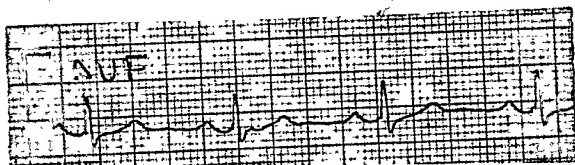
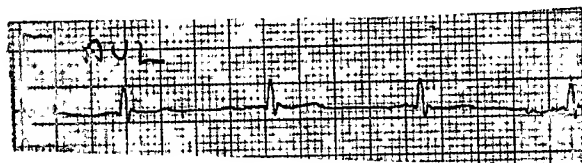
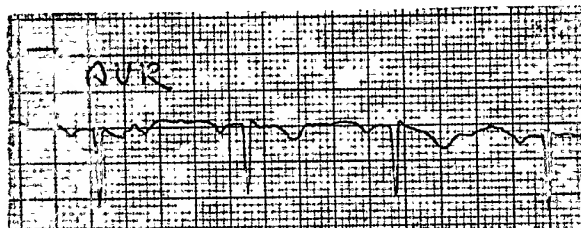
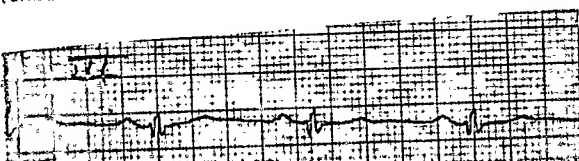
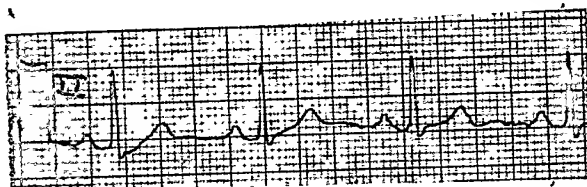
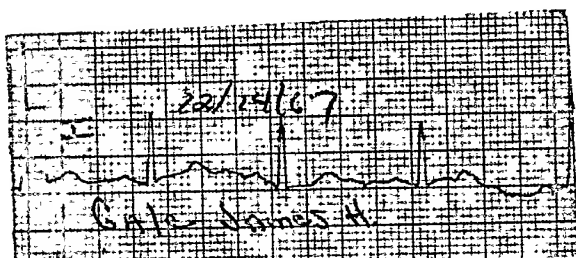
SUMMARY, SERIAL CHANGES, AND IMPLICATIONS:


copy made for doctor
11-28-73 per request
from Mr. Galt
JG
11-28-73

WNL

(Continue on reverse)

NO. ECG	SIGNATURE	TITLE PHYSICAL EXAM ROOM	DATE 12-18-67
PATIENT'S IDENTIFICATION (For typed or written entries give: name, first, middle, grade; date; hospital or medical facility)		REGISTER NO.	RQ NO. T-18
GALE, James H. ASST. Director - FBI NNMC		ELECTROCARDIOGRAPHIC RECORD Standard Form 520 520-104 (Attach tracings to S. F. 507)	




CLINICAL RECORD				ELECTROCARDIOGRAPHIC RECORD				PREVIOUS ECG	
CLINICAL IMPRESSION <i>Routine</i>				MEDICATION				<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
								<input type="checkbox"/> EMERGENCY	<input type="checkbox"/> BEDSIDE
								<input checked="" type="checkbox"/> ROUTINE	<input checked="" type="checkbox"/> AMBULANT
AGE	SEX	RACE	HEIGHT	WEIGHT	H. P.	SIGNATURE OF WARD PHYS		DATE	
47	M	Cauc	74"	189		<i>Dr.</i> 		10-30-68	
RHYTHM						AXIS DEVIATION		RATES	
								AURIC. VENT.	
INTERVALS						P WAVES			
PR						QRS		QT	
QRS COMPLEXES									
RS-T SEGMENT						T WAVES			
UNIPOLAR EXTREMITY LEADS (Group)									

PRECORDIAL LEADS (Specify)

*copy made for doctor
per request from Mr. Gale
11-28-73
Jge*

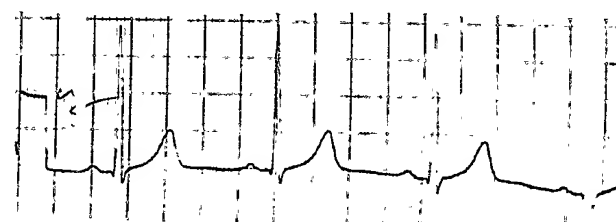
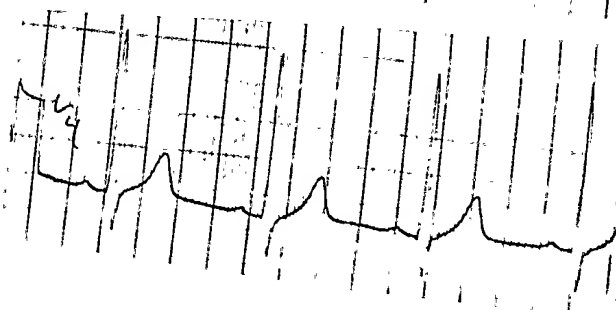
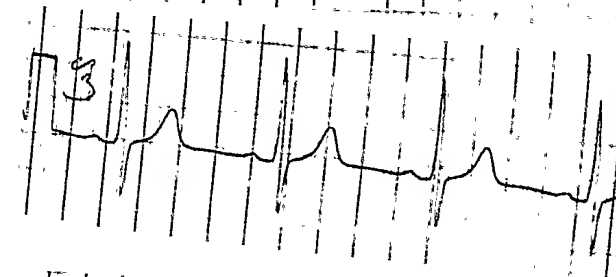
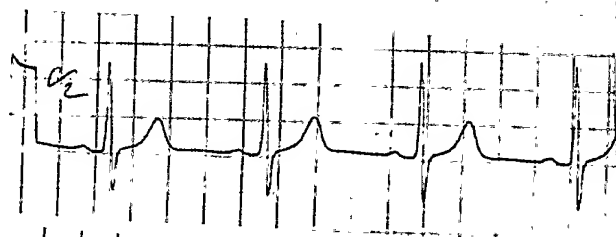
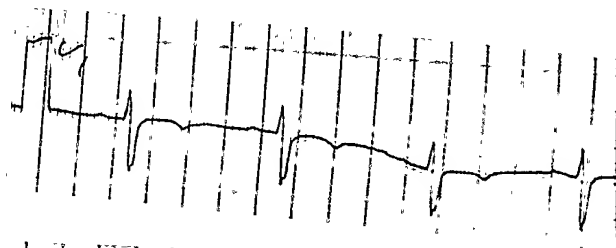
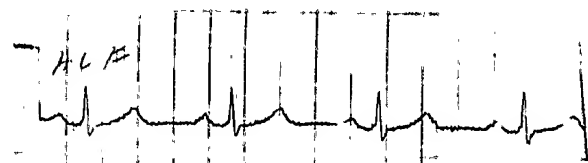
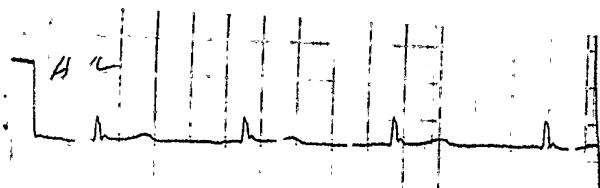
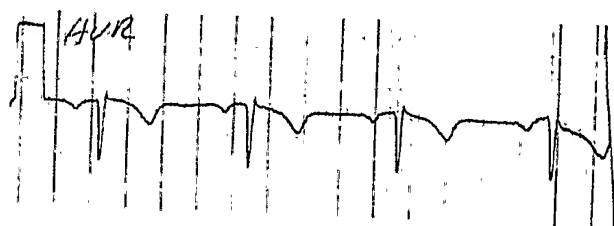
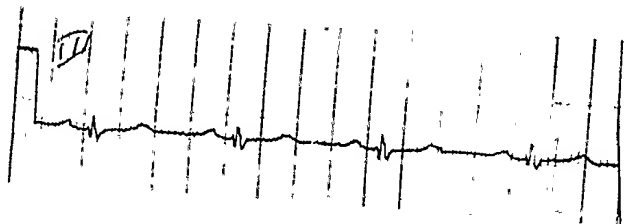
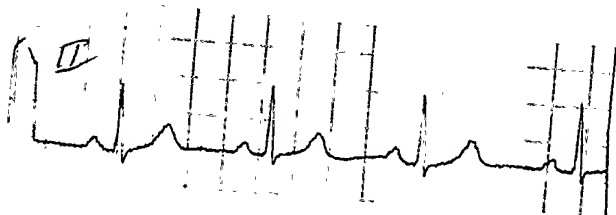
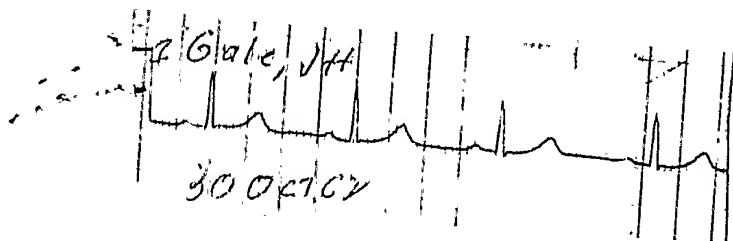
SUMMARY, SERIAL CHANGES, AND IMPLICATIONS:

WNL

Need Chart.		verse) b6	
NO. 8030		TITLE	DATE
ECG			
PATIENT'S IDENTIFICATION		first,)	REGISTER NO. <i>FBI</i>	WARD NO. T-18

*Gale, James H.
Assistant Director - FBI
NNMC*

ELECTROCARDIOGRAPHIC RECORD
Standard Form 520
20-104
(Attach tracings to S. F. 507)



CLINICAL RECORD		ELECTROCARDIOGRAPHIC RECORD	
CLINICAL IMPRESSION		MEDICATION	
ROUTINE			
AGE	SEX	RACE	HEIGHT
48	M	CAUC	74"
WEIGHT	B. P.	SIGNATURE OF WARD	
189		DR [Signature]	
RHYTHM		AXIS DEVIATION (QRS)	
INTERVALS		P WAVES	
PR 0.16 QRS 0.06 QT			
QRS COMPLEXES		RATES	
		AURIC. 68 VENT. 68	
RS-T SEGMENT		T WAVES	
UNIPOLAR EXTREMITY LEADS (Specify)			

PRECORDIAL LEADS (Specify)

SUMMARY, SERIAL CHANGES, AND IMPLICATIONS:

Copy made for doctor
11-28-73 per request
from Mr. Galt
JH

① WNL

② NSC since 10-30-68

(Continue on reverse)

NO.	SIGNATURE	TITLE	DATE
ECG			

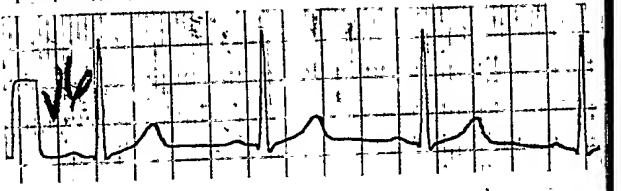
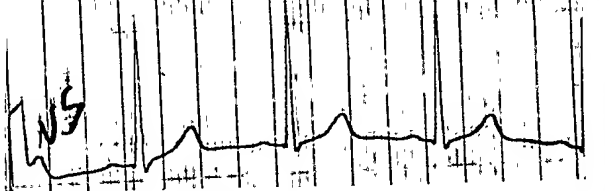
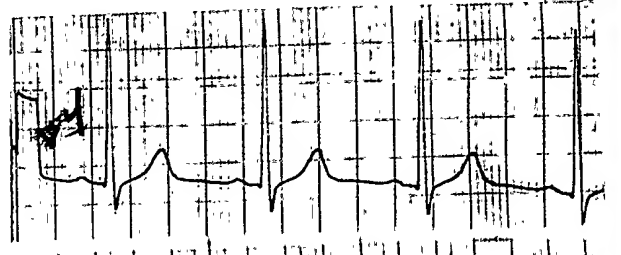
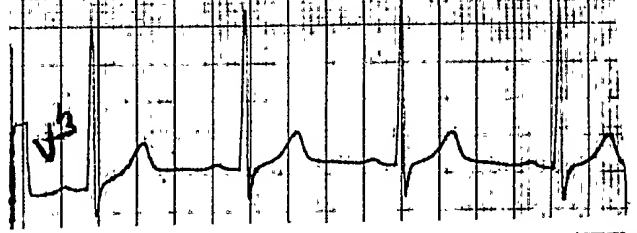
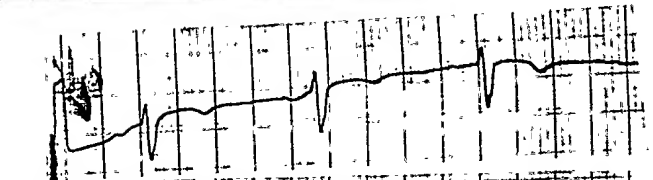
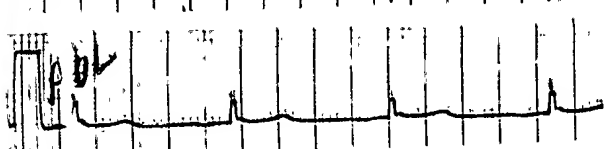
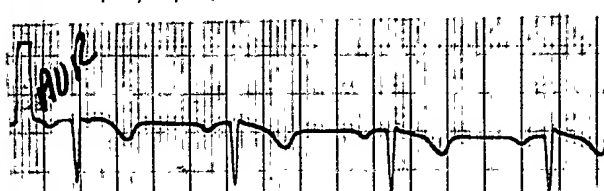
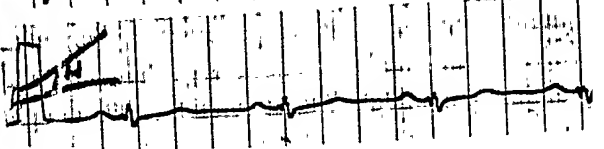
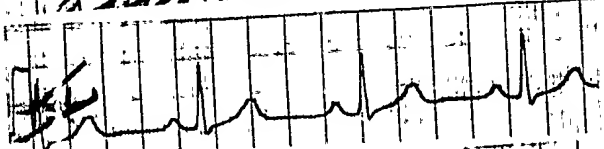
PATIENT'S IDENTIFICATION (For typed or written entries give: Name—last, first, middle; grade; date; hospital or medical facility)

GALT, JAMES HENRY
ASST. DIR. FBI

REGISTER NO. FB/PE. PM. 209
WARD NO.

ELECTROCARDIOGRAPHIC RECORD
Standard Form 520
20-101
(Attach tracings to S. F. 507)

Half James H
12-018-69
FBI



CLINICAL RECORD		ELECTROCARDIOGRAPHIC RECORD		PREVIOUS ECG	
CLINICAL IMPRESSION ROUTINE		MEDICATION		<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
				<input type="checkbox"/> EMERGENCY	<input type="checkbox"/> BEDSIDE
49 SEX M RACE CAUL HEIGHT 74" WEIGHT 190 B. P. DR. SIGNATURE OF W DR.		<input checked="" type="checkbox"/> ROUTINE		<input checked="" type="checkbox"/> AMBULANT	DATE X
RHYTHM		A (QRS)		RATES	
INTERVALS		P WAVES		AURIC. VENT.	
PR		QRS		QT	
QRS COMPLEXES		RS-T SEGMENT		T WAVES	
UNIPOLAR EXTREMITY LEADS (Specify)					

PRECORDIAL LEADS (Specify)

SUMMARY, SERIAL CHANGES, AND IMPLICATIONS:

Copy made for
doctor per call from
mm. Galt 11-28-73

WNL
N.S.C. Since 11/5/70

NO.	SIG	verse)	DATE
ECG		TITLE	11/5/71
PATIENT'S IDENTIFICATION (F m)		first, last, middle	WARD NO.
GALE, JAMES HENRY		REGISTER NO.	Sec.
ASST. - DIR - F.B.I.		T-18 - F.B.I.	
NANML		ELECTROCARDIOGRAPHIC RECORD	
D.O.B. - 9-28-21		Standard Form 520	
		(Attach tracings to S I 507)	

b6

b6

CLINICAL RECORD				ELECTROCARDIOGRAPHIC RECORD				PREVIOUS ECG	
CLINICAL IMPRESSION ROUTINE				MEDICATION				<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
								<input type="checkbox"/> EMERGENCY	<input type="checkbox"/> BEDSIDE
AGE 49 M SEX M RACE CAUC HEIGHT 74" WEIGHT 187 B. P. 110/70 SIGNATURE DR. [redacted] PHYSICIAN [redacted]				<input checked="" type="checkbox"/> ROUTINE				<input checked="" type="checkbox"/> AMBULANT	DATE 11-5-70
RHYTHM				AXIS DEVIATION (QRS)				RATES	
INTERVALS				P WAVES				AURIC. VENT.	
RR				QRS				QT	
QRS COMPLEXES									
RS-T SEGMENT				T WAVES					
UNIPOLAR EXTREMITY LEADS (Specify)									

PRECARDIAL LEADS (Specify)

SUMMARY, SERIAL CHANGES, AND IMPLICATIONS:

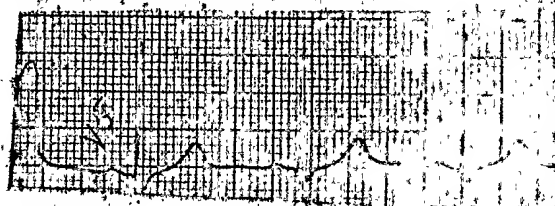
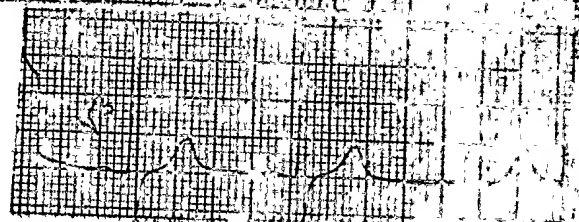
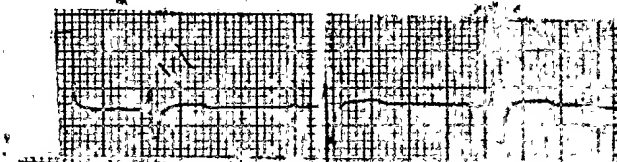
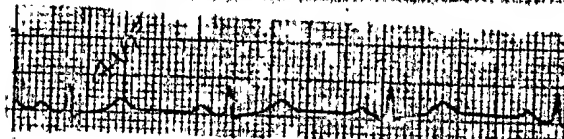
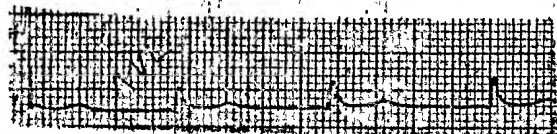
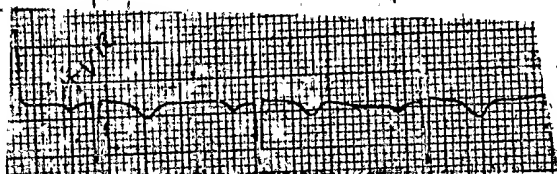
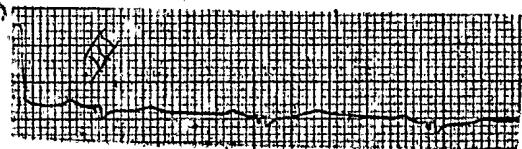
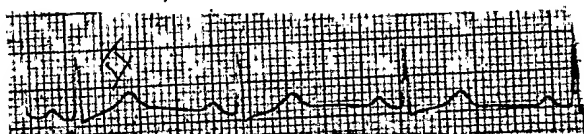
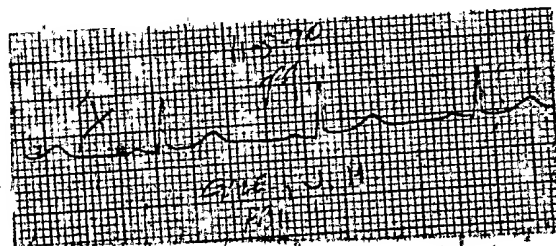
*Copy made for
doctor 11-28-72 per
request from Mr. Gale*

WNL
NSC 12-18-69

NO.	[redacted]	(on reverse)
IC.	[redacted]	TITLE WNL
PATIENT IDENTIFICATION	[redacted]	DATE 11-5-70
middle; grade, date, hospital or medical facility)		WARD NO. 209
last, first,		REGISTER NO. FBI H. A. 209

GALE, JAMES HENRY
ASST. DIR. FBI
NNML

ELECTROCARDIOGRAPHIC RECORD
Standard Form 520
10-104
(Attach tracings to S. F. 502)



REPORT OF MEDICAL HISTORY U.S. Civil Service Employees and Applicants

Budget Bureau
Approved 50-10390
FBI

This information is for official and medically-confidential use only and will not be released to unauthorized persons.

1. LAST NAME—FIRST NAME—MIDDLE NAME GALE JAMES H.		2. TITLE OF POSITION ASSISTANT DIRECTOR - F.B.I.		3. SOCIAL SECURITY NUMBER
4. HOME ADDRESS (Number, street or RFD, city or town, State, and ZIP Code) 3367 ROCKY MOUNT RD FAIRFAX, VIRGINIA - 22030		5. PURPOSE OF EXAMINATION		6. DATE OF EXAMINATION
7. SEX MALE	8. TOTAL YEARS GOVERNMENT SERVICE 18 months MILITARY 30 YEARS CIVILIAN	9. AGENCY F.B.I.		10. ORGANIZATION UNIT
11. DATE OF BIRTH 9-28-21	12. PLACE OF BIRTH CLEVELAND, OHIO		13. EXAMINING FACILITY OR EXAMINER, AND ADDRESS (Including ZIP Code)	

14. STATEMENT OF EXAMINEE'S PRESENT HEALTH AND MEDICATIONS CURRENTLY USED (Follow by description of past history, if complaint exists)

EXCELLENT

15. DO YOU (Please check at left of each item):			16. HAVE YOU EVER (Please check at left of each item):		
YES	NO	(Check each item)	YES	NO	(Check each item)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	WEAR GLASSES OR CONTACT LENSES	<input type="checkbox"/>	<input checked="" type="checkbox"/>	LIVED WITH ANYONE WHO HAD TUBERCULOSIS
<input checked="" type="checkbox"/>	<input type="checkbox"/>	HAVE VISION IN BOTH EYES	<input type="checkbox"/>	<input checked="" type="checkbox"/>	COUGHED UP BLOOD
<input type="checkbox"/>	<input checked="" type="checkbox"/>	WEAR A HEARING AID	<input type="checkbox"/>	<input checked="" type="checkbox"/>	bled excessively after injury or tooth extraction
<input type="checkbox"/>	<input checked="" type="checkbox"/>	STUTTER OR STAMMER HABITUALLY			
<input type="checkbox"/>	<input checked="" type="checkbox"/>	WEAR A BRACE OR BACK SUPPORT			

17. HAVE YOU EVER HAD OR HAVE YOU NOW (Please check at left of each item):											
YES	NO	DON'T KNOW	(Check each item)	YES	NO	DON'T KNOW	(Check each item)	YES	NO	DON'T KNOW	(Check each item)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	SCARLET FEVER, ERYSIPELAS	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	ASTHMA	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	RECENT GAIN OR LOSS OF WEIGHT
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	DIPHTHERIA	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	SHORTNESS OF BREATH	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	ARTHRITIS OR RHEUMATISM
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	RHEUMATIC FEVER	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	PAIN OR PRESSURE IN CHEST	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	BONE, JOINT, OR OTHER DEFORMITY
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	SWOLLEN OR PAINFUL JOINTS	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	CHRONIC COUGH	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	LAMENESS
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	MUMPS	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	PALPITATION OR POUNDING HEART	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	LOSS OF ARM, LEG, FINGER, OR TOE
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	COLOR BLINDNESS	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	HIGH OR LOW BLOOD PRESSURE	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	PAINFUL OR "TRICK" SHOULDER OR ELBOW
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	FREQUENT OR SEVERE HEADACHE	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	CRAMPS IN YOUR LEGS	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	RECURRENT BACK PAIN
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	DIZZINESS OR FAINTING SPELLS	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	FREQUENT INDIGESTION	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	"TRICK" OR LOCKED KNEE
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	EYE TROUBLE	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	STOMACH, LIVER, OR INTESTINAL TROUBLE	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	FOOT TROUBLE
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	EAR, NOSE, OR THROAT TROUBLE	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	GALL BLADDER TROUBLE OR GALLSTONES	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	NEURITIS
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	RUNNING EARS	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	JAUNDICE	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	PARALYSIS (Inc. infantile)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	HEARING LOSS	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	ANY ADVERSE REACTION TO SERUM, DRUG, OR MEDICINE	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	EPILEPSY OR FITS
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	CHRONIC OR FREQUENT COLDS	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	BROKEN BONES	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	CAR, TRAIN, SEA, OR AIR SICKNESS
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	SEVERE TOOTH OR GUM TROUBLE	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	TUMOR, GROWTH, CYST, OR CANCER	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	FREQUENT TROUBLE SLEEPING
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	SINUSITIS	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	RUPTURE/HERNIA	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	FREQUENT OR TERRIFYING NIGHTMARES
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	HAY FEVER	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	APPENDICITIS	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	DEPRESSION OR EXCESSIVE WORRY
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	HEAD INJURY	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	PILES OR RECTAL DISEASE	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	LOSS OF MEMORY OR AMNESIA
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	SKIN DISEASES	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	FREQUENT OR PAINFUL URINATION	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	NERVOUS TROUBLE OF ANY SORT
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	GOITER	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	KIDNEY STONE OR BLOOD IN URINE	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	ANY DRUG OR NARCOTIC HABIT
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	TUBERCULOSIS	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	SUGAR OR ALBUMIN IN URINE	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	EXCESSIVE DRINKING HABIT
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	SOAKING SWEATS (Night sweats)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	BOILS	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	PERIODS OF UNCONSCIOUSNESS

18. HOW MANY JOBS HAVE YOU HAD IN THE PAST THREE YEARS? 1	19. WHAT IS THE LONGEST PERIOD YOU HELD ANY OF THESE JOBS? MONTHS 30 YEARS	20. WHAT IS YOUR USUAL OCCUPATION? ASSISTANT DIRECTOR - FBI	21. ARE YOU (Check one) <input checked="" type="checkbox"/> RIGHT HANDED <input type="checkbox"/> LEFT HANDED
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Do Not Transmit Enclosed Material
With Official Personnel Folder.

OPTIONAL FORM 58
MAY 1968
U.S. CIVIL SERVICE COMMISSION
FPM CHAPTER 293
5058-101

YES	NO	CHECK EACH ITEM YES OR NO. EVERY ITEM CHECKED YES MUST BE FULLY EXPLAINED IN BLANK SPACE ON RIGHT
		22. HAVE YOU BEEN REFUSED EMPLOYMENT OR BEEN UNABLE TO HOLD A JOB BECAUSE OF: A. SENSITIVITY TO CHEMICALS, DUST, SUNLIGHT, ETC.
		B. INABILITY TO PERFORM CERTAIN MOTIONS
		C. INABILITY TO ASSUME CERTAIN POSITIONS
		D. OTHER MEDICAL REASONS (If yes, give reasons)
		23. HAVE YOU EVER WORKED WITH RADIOACTIVE SUBSTANCE?
		24. HAVE YOU EVER BEEN DENIED LIFE INSURANCE? (If yes, state reason and give details)
		25. HAVE YOU HAD, OR HAVE YOU BEEN ADVISED TO HAVE, ANY OPERATIONS? (If yes, describe and give age at which occurred)
		26. HAVE YOU EVER BEEN A PATIENT IN ANY TYPE OF HOSPITAL? (If yes, specify when, where, why, and name of doctor and complete address of hospital)
		27. HAVE YOU EVER HAD ANY ILLNESS OR INJURY OTHER THAN THOSE ALREADY NOTED? (If yes, specify when, where, and give details)
		28. HAVE YOU CONSULTED OR BEEN TREATED BY CLINICS, PHYSICIANS, HEALERS, OR OTHER PRACTITIONERS WITHIN THE PAST 5 YEARS FOR OTHER THAN MINOR ILLNESSES? (If yes, give complete address of doctor, hospital, clinic, and details)
		29. HAVE YOU EVER BEEN REJECTED FOR MILITARY SERVICE BECAUSE OF PHYSICAL, MENTAL, OR OTHER REASONS? (If yes, give date and reason for rejection)
		30. HAVE YOU EVER BEEN DISCHARGED FROM MILITARY SERVICE BECAUSE OF PHYSICAL, MENTAL, OR OTHER REASONS? (If yes, give date, reason, and type of discharge: whether honorable, other than honorable, for unfitness or unsuitability)
		31. HAVE YOU EVER RECEIVED, IS THERE PENDING, OR HAVE YOU APPLIED FOR PENSION OR COMPENSATION FOR EXISTING DISABILITY? (If yes, specify what kind, granted by whom, and what amount, when, why)

ULCEATED RECTAL TISSUE
 OPERATION - 1946 -
 5 years old broken leg
 St Johns Hospital - Cleveland Ohio

I CERTIFY THAT I HAVE REVIEWED THE FOREGOING INFORMATION SUPPLIED BY ME AND THAT IT IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

I AUTHORIZE ANY OF THE DOCTORS, HOSPITALS, OR CLINICS MENTIONED ABOVE TO FURNISH THE GOVERNMENT A COMPLETE TRANSCRIPT OF MY MEDICAL RECORD FOR PURPOSES OF PROCESSING MY APPLICATION FOR THIS EMPLOYMENT OR SERVICE.

TYPED OR PRINTED NAME OF EXAMINEE

JAMES H. GALE

SIGNATURE

James H. Gale

NOTE: HAND TO THE DOCTOR OR NURSE, OR IF MAILED MARK ENVELOPE "TO BE OPENED BY MEDICAL OFFICER ONLY."

32. PHYSICIAN'S SUMMARY AND ELABORATION OF ALL PERTINENT DATA (Physician shall comment on all positive answers in items 15 through 31. Physician may develop by interview any additional medical history he deems important, and record any significant findings here.)

No significant problems

	R	DATE 8-5-71	SIG		NUMBER OF ATTACHED SHEETS
PRINTING OFFICE: 1968 OF-300-463 (44-H)					b6

REPORT OF MEDICAL HISTORY

U.S. Civil Service Employees and Applicants

Budget Bureau
Approved 50-R0390

This information is for official and medically-confidential use only and will not be released to unauthorized persons.

1. LAST NAME—FIRST NAME—MIDDLE NAME Gale, James H.		2. TITLE OF POSITION Assistant Director		3. SOCIAL SECURITY NUMBER 294 01 8383	
4. HOME ADDRESS (Number, street or RFD, city or town, State, and ZIP Code) 3307 Rocky Mount Road Fairfax, Virginia 22030		5. PURPOSE OF EXAMINATION		6. DATE OF EXAMINATION 11/5/70	
7. SEX Male	8. TOTAL YEARS GOVERNMENT SERVICE MILITARY CIVILIAN	9. AGENCY FBI		10. ORGANIZATION UNIT Special Investigative Division	
11. DATE OF BIRTH 9/28/21		12. PLACE OF BIRTH CLEVELAND, OHIO		13. EXAMINING FACILITY OR EXAMINER, AND ADDRESS (Including ZIP Code)	

14. STATEMENT OF EXAMINEE'S PRESENT HEALTH AND MEDICATIONS CURRENTLY USED (Follow by description of past history, if complaint exists)

EXCELLENT

15. DO YOU (Please check at left of each item):			16. HAVE YOU EVER (Please check at left of each item):		
YES	NO	(Check each item)	YES	NO	(Check each item)
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	WEAR GLASSES OR CONTACT LENSES	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	LIVED WITH ANYONE WHO HAD TUBERCULOSIS
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	HAVE VISION IN BOTH EYES	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	COUGHED UP BLOOD
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	WEAR A HEARING AID	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	BLED EXCESSIVELY AFTER INJURY OR TOOTH EXTRACTION
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	STUTTER OR STAMMER HABITUALLY			
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	WEAR A BRACE OR BACK SUPPORT			

17. HAVE YOU EVER HAD OR HAVE YOU NOW (Please check at left of each item):											
YES	NO	DON'T KNOW	(Check each item)	YES	NO	DON'T KNOW	(Check each item)	YES	NO	DON'T KNOW	(Check each item)
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	SCARLET FEVER, ERYSIPELAS	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	ASTHMA	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	RECENT GAIN OR LOSS OF WEIGHT
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	DIPHTHERIA	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	SHORTNESS OF BREATH	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	ARTHRITIS OR RHEUMATISM
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	RHEUMATIC FEVER	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	PAIN OR PRESSURE IN CHEST	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	BONE, JOINT, OR OTHER DEFORMITY
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	SWOLLEN OR PAINFUL JOINTS	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	CHRONIC COUGH	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	LAMENESS
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	MUMPS	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	PALPITATION OR POUNDING HEART	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	LOSS OF ARM, LEG, FINGER, OR TOE
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	COLOR BLINDNESS	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	HIGH OR LOW BLOOD PRESSURE	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	PAINFUL OR "TRICK" SHOULDER OR ELBOW
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	FREQUENT OR SEVERE HEADACHE	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	CRAMPS IN YOUR LEGS	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	RECURRENT BACK PAIN
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	DIZZINESS OR FAINTING SPELLS	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	FREQUENT INDIGESTION	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	"TRICK" OR LOCKED KNEE
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	EYE TROUBLE	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	STOMACH, LIVER, OR INTESTINAL TROUBLE	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	FOOT TROUBLE
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	EAR, NOSE, OR THROAT TROUBLE	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	GALL BLADDER TROUBLE OR GALLSTONES	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	NEURITIS
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	RUNNING EARS	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	JAUNDICE	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	PARALYSIS (Inc. infantile)
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	HEARING LOSS	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	ANY ADVERSE REACTION TO SERUM, DRUG, OR MEDICINE	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	EPILEPSY OR FITS
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	CHRONIC OR FREQUENT COLDS	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	BROKEN BONES	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	CAR, TRAIN, SEA, OR AIR SICKNESS
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	SEVERE TOOTH OR GUM TROUBLE	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	TUMOR, GROWTH, CYST, OR CANCER	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	FREQUENT TROUBLE SLEEPING
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	SINUSITIS	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	RUPTURE/HERNIA	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	FREQUENT OR TERRIFYING NIGHTMARES
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	HAY FEVER	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	APPENDICITIS	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	DEPRESSION OR EXCESSIVE WORRY
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	HEAD INJURY	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	PILES OR RECTAL DISEASE	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	LOSS OF MEMORY OR AMNESIA
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	SKIN DISEASES	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	FREQUENT OR PAINFUL URINATION	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	NERVOUS TROUBLE OF ANY SORT
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	GOITER	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	KIDNEY STONE OR BLOOD IN URINE	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	ANY DRUG OR NARCOTIC HABIT
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	TUBERCULOSIS	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	SUGAR OR ALBUMIN IN URINE	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	EXCESSIVE DRINKING HABIT
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	SOAKING SWEATS (Night sweats)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	BOILS	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	PERIODS OF UNCONSCIOUSNESS

18. HOW MANY JOBS HAVE YOU HAD IN THE PAST THREE YEARS? ONE	19. WHAT IS THE LONGEST PERIOD YOU HELD ANY OF THESE JOBS? MONTHS 29 YEARS	20. WHAT IS YOUR USUAL OCCUPATION? ASST DIRECTOR	21. ARE YOU (Check one) <input checked="" type="checkbox"/> RIGHT HANDED <input type="checkbox"/> LEFT HANDED
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Do Not Transmitt This Material
With Official Personnel Folder. F B I.

OPTIONAL FORM 58
MAY 1968
U.S. CIVIL SERVICE COMMISSION
FPM CHAPTER 293
5058-101

YES	NO	CHECK EACH ITEM YES OR NO. EVERY ITEM CHECKED YES MUST BE FULLY EXPLAINED IN BLANK SPACE ON RIGHT
	<input checked="" type="checkbox"/>	22. HAVE YOU BEEN REFUSED EMPLOYMENT OR BEEN UNABLE TO HOLD A JOB BECAUSE OF: A. SENSITIVITY TO CHEMICALS, DUST, SUNLIGHT, ETC.
	<input checked="" type="checkbox"/>	B. INABILITY TO PERFORM CERTAIN MOTIONS
	<input checked="" type="checkbox"/>	C. INABILITY TO ASSUME CERTAIN POSITIONS
	<input checked="" type="checkbox"/>	D. OTHER MEDICAL REASONS (If yes, give reasons)
	<input checked="" type="checkbox"/>	23. HAVE YOU EVER WORKED WITH RADIOACTIVE SUBSTANCE?
	<input checked="" type="checkbox"/>	24. HAVE YOU EVER BEEN DENIED LIFE INSURANCE? (If yes, state reason and give details)
<input checked="" type="checkbox"/>		25. HAVE YOU HAD, OR HAVE YOU BEEN ADVISED TO HAVE, ANY OPERATIONS? (If yes, describe and give age at which occurred)
<input checked="" type="checkbox"/>		26. HAVE YOU EVER BEEN A PATIENT IN ANY TYPE OF HOSPITAL? (If yes, specify when, where, why, and name of doctor and complete address of hospital)
	<input checked="" type="checkbox"/>	27. HAVE YOU EVER HAD ANY ILLNESS OR INJURY OTHER THAN THOSE ALREADY NOTED? (If yes, specify when, where, and give details)
	<input checked="" type="checkbox"/>	28. HAVE YOU CONSULTED OR BEEN TREATED BY CLINICS, PHYSICIANS, HEALERS, OR OTHER PRACTITIONERS WITHIN THE PAST 5 YEARS FOR OTHER THAN MINOR ILLNESSES? (If yes, give complete address of doctor, hospital, clinic, and details)
	<input checked="" type="checkbox"/>	29. HAVE YOU EVER BEEN REJECTED FOR MILITARY SERVICE BECAUSE OF PHYSICAL, MENTAL, OR OTHER REASONS? (If yes, give date and reason for rejection)
	<input checked="" type="checkbox"/>	30. HAVE YOU EVER BEEN DISCHARGED FROM MILITARY SERVICE BECAUSE OF PHYSICAL, MENTAL, OR OTHER REASONS? (If yes, give date, reason, and type of discharge: whether honorable, other than honorable, for unfitness or unsuitability)
	<input checked="" type="checkbox"/>	31. HAVE YOU EVER RECEIVED, IS THERE PENDING, OR HAVE YOU APPLIED FOR PENSION OR COMPENSATION FOR EXISTING DISABILITY? (If yes, specify what kind, granted by whom, and what amount, when, why)

#25526

ULCERATED RECTAL TISSUE
1946 -

BROKEN LEG - 1926

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TYPED OR PRINTED NAME OF EXAMINEE

James H. Gale

SIGNATURE

James H. Gale

NOTE: HAND TO THE DOCTOR OR NURSE, OR IF MAILED MARK ENVELOPE "TO BE OPENED BY MEDICAL OFFICER ONLY."

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Scarlet/mumps - UCHD

Ear trouble = high frequency
loss 2° to gun fire in
1946.

Broken (R) leg at age 5 & sequelae
Proctitis & surgical repair in
1946 - uses vaseline now
for anal lubrication &
problems

#25526 As noted above.

TYPED OR PRINTED NAME OF PHYSICIAN OR EXAMINER

LT, MC, USNR

DATE

5 Nov 76

SIGN

NUMBER OF ATTACHED
SHEETS

b6

REPORT OF MEDICAL HISTORY

U.S. Civil Service Employees and Applicants

Budget Bureau
Approved 50-R0390

This information is for official and medically-confidential use only and will not be released to unauthorized persons.

1. LAST NAME—FIRST NAME—MIDDLE NAME GALE, JAMES HENRY			2. TITLE OF POSITION ASST. DIRECTOR			3. SOCIAL SECURITY NUMBER | | |		
4. HOME ADDRESS (Number, street or RFD, city or town, State, and ZIP Code) 3307 ROCKY MOUNT RD. FAIRBAX WIS 61117			5. PURPOSE OF EXAMINATION			6. DATE OF EXAMINATION		
7. SEX MALE		8. TOTAL YEARS GOVERNMENT SERVICE 30 YRS		9. AGENCY F.B.I.		10. ORGANIZATION UNIT		
11. DATE OF BIRTH 9-28-21		12. PLACE OF BIRTH CLEVELAND, OHIO		13. EXAMINING FACILITY OR EXAMINER, AND ADDRESS (Including ZIP Code)				

14. STATEMENT OF EXAMINEE'S PRESENT HEALTH AND MEDICATIONS CURRENTLY USED (Follow by description of past history, if complaint exists)

EXCELLENT

15. DO YOU (Please check at left of each item):						16. HAVE YOU EVER (Please check at left of each item):					
YES	NO	(Check each item)				YES	NO	(Check each item)			
<input checked="" type="checkbox"/>	<input type="checkbox"/>	WEAR GLASSES OR CONTACT LENSES				<input type="checkbox"/>	<input type="checkbox"/>	LIVED WITH ANYONE WHO HAD TUBERCULOSIS			
<input type="checkbox"/>	<input type="checkbox"/>	HAVE VISION IN BOTH EYES				<input type="checkbox"/>	<input type="checkbox"/>	COUGHED UP BLOOD			
<input type="checkbox"/>	<input type="checkbox"/>	WEAR A HEARING AID				<input type="checkbox"/>	<input type="checkbox"/>	BLED EXCESSIVELY AFTER INJURY OR TOOTH EXTRACTION			
<input type="checkbox"/>	<input type="checkbox"/>	STUTTER OR STAMMER HABITUALLY				<input type="checkbox"/>	<input type="checkbox"/>				
<input type="checkbox"/>	<input type="checkbox"/>	WEAR A BRACE OR BACK SUPPORT				<input type="checkbox"/>	<input type="checkbox"/>				

17. HAVE YOU EVER HAD OR HAVE YOU NOW (Please check at left of each item):											
YES	NO	DON'T KNOW	(Check each item)			YES	NO	DON'T KNOW	(Check each item)		
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	SCARLET FEVER, ERYSIPELAS			<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	ASTHMA		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	DIPHTHERIA			<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	SHORTNESS OF BREATH		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	RHEUMATIC FEVER			<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	PAIN OR PRESSURE IN CHEST		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	SWOLLEN OR PAINFUL JOINTS			<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	CHRONIC COUGH		
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	MUMPS			<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	PALPITATION OR POUNDING HEART		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	COLOR BLINDNESS			<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	HIGH OR LOW BLOOD PRESSURE		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	FREQUENT OR SEVERE HEADACHE			<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	CRAMPS IN YOUR LEGS		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	DIZZINESS OR FAINTING SPELLS			<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	FREQUENT INDIGESTION		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	EYE TROUBLE			<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	STOMACH, LIVER, OR INTESTINAL TROUBLE		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	EAR, NOSE, OR THROAT TROUBLE			<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	GALL BLADDER TROUBLE OR GALLSTONES		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	RUNNING EARS			<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	JAUNDICE		
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	HEARING LOSS			<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	ANY ADVERSE REACTION TO SERUM, DRUG, OR MEDICINE		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	CHRONIC OR FREQUENT COLDS			<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	BROKEN BONES		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	SEVERE TOOTH OR GUM TROUBLE			<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	TUMOR, GROWTH, CYST, OR CANCER		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	SINUSITIS			<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	RUPTURE/HERNIA		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	HAY FEVER			<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	APPENDICITIS		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	HEAD INJURY			<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	PILES OR RECTAL DISEASE		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	SKIN DISEASES			<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	FREQUENT OR PAINFUL URINATION		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	GOITER			<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	KIDNEY STONE OR BLOOD IN URINE		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	TUBERCULOSIS			<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	SUGAR OR ALBUMIN IN URINE		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	SOAKING SWEATS (Night sweats)			<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	BOILS		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	RECENT GAIN OR LOSS OF WEIGHT		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	ARTHRITIS OR RHEUMATISM		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	BONE, JOINT, OR OTHER DEFORMITY		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	LAMENESS		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	LOSS OF ARM, LEG, FINGER, OR TOE		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	PAINFUL OR "TRICK" SHOULDER OR ELBOW		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	RECURRENT BACK PAIN		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	"TRICK" OR LOCKED KNEE		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	FOOT TROUBLE		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	NEURITIS		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	PARALYSIS (Inc. infantile)		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	EPILEPSY OR FITS		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	CAR, TRAIN, SEA, OR AIR SICKNESS		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	FREQUENT TROUBLE SLEEPING		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	FREQUENT OR TERRIFYING NIGHTMARES		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	DEPRESSION OR EXCESSIVE WORRY		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	LOSS OF MEMORY OR AMNESIA		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	NERVOUS TROUBLE OF ANY SORT		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	ANY DRUG OR NARCOTIC HABIT		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	EXCESSIVE DRINKING HABIT		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	PERIODS OF UNCONSCIOUSNESS		

18. HOW MANY JOBS HAVE YOU HAD IN THE PAST THREE YEARS?		19. WHAT IS THE LONGEST PERIOD YOU HELD ANY OF THESE JOBS? MONTHS		20. WHAT IS YOUR USUAL OCCUPATION?		21. ARE YOU (Check one) <input type="checkbox"/> RIGHT HANDED <input type="checkbox"/> LEFT HANDED	
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YES	NO	CHECK EACH ITEM YES OR NO. EVERY ITEM CHECKED YES MUST BE FULLY EXPLAINED IN BLANK SPACE ON RIGHT
	<input checked="" type="checkbox"/>	22. HAVE YOU BEEN REFUSED EMPLOYMENT OR BEEN UNABLE TO HOLD A JOB BECAUSE OF: A. SENSITIVITY TO CHEMICALS, DUST, SUNLIGHT, ETC.
	<input checked="" type="checkbox"/>	B. INABILITY TO PERFORM CERTAIN MOTIONS
	<input checked="" type="checkbox"/>	C. INABILITY TO ASSUME CERTAIN POSITIONS
	<input checked="" type="checkbox"/>	D. OTHER MEDICAL REASONS (If yes, give reasons)
	<input checked="" type="checkbox"/>	23. HAVE YOU EVER WORKED WITH RADIOACTIVE SUBSTANCE?
	<input checked="" type="checkbox"/>	24. HAVE YOU EVER BEEN DENIED LIFE INSURANCE? (If yes, state reason and give details)
<input checked="" type="checkbox"/>		25. HAVE YOU HAD, OR HAVE YOU BEEN ADVISED TO HAVE, ANY OPERATIONS? (If yes, describe and give age at which occurred)
	<input checked="" type="checkbox"/>	26. HAVE YOU EVER BEEN A PATIENT IN ANY TYPE OF HOSPITAL? (If yes, specify when, where, why, and name of doctor and complete address of hospital)
	<input checked="" type="checkbox"/>	27. HAVE YOU EVER HAD ANY ILLNESS OR INJURY OTHER THAN THOSE ALREADY NOTED? (If yes, specify when, where, and give details)
	<input checked="" type="checkbox"/>	28. HAVE YOU CONSULTED OR BEEN TREATED BY CLINICS, PHYSICIANS, HEALERS, OR OTHER PRACTITIONERS WITHIN THE PAST 5 YEARS FOR OTHER THAN MINOR ILLNESSES? (If yes, give complete address of doctor, hospital, clinic, and details)
	<input checked="" type="checkbox"/>	29. HAVE YOU EVER BEEN REJECTED FOR MILITARY SERVICE BECAUSE OF PHYSICAL, MENTAL, OR OTHER REASONS? (If yes, give date and reason for rejection)
	<input checked="" type="checkbox"/>	30. HAVE YOU EVER BEEN DISCHARGED FROM MILITARY SERVICE BECAUSE OF PHYSICAL, MENTAL, OR OTHER REASONS? (If yes, give date, reason, and type of discharge: whether honorable, other than honorable, for unfitness or unsuitability)
	<input checked="" type="checkbox"/>	31. HAVE YOU EVER RECEIVED, IS THERE PENDING, OR HAVE YOU APPLIED FOR PENSION OR COMPENSATION FOR EXISTING DISABILITY? (If yes, specify what kind, granted by whom, and what amount, when, why)

age 24 - operation for ulcerated rectal tissue

I CERTIFY THAT I HAVE REVIEWED THE FOREGOING INFORMATION SUPPLIED BY ME AND THAT IT IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

I AUTHORIZE ANY OF THE DOCTORS, HOSPITALS, OR CLINICS MENTIONED ABOVE TO FURNISH THE GOVERNMENT A COMPLETE TRANSCRIPT OF MY MEDICAL RECORD FOR PURPOSES OF PROCESSING MY APPLICATION FOR THIS EMPLOYMENT OR SERVICE.

TYPED OR PRINTED NAME OF EXAMINEE

JAMES H. GALE

SIGNATURE

James H. Gale

NOTE: HAND TO THE DOCTOR OR NURSE, OR IF MAILED MARK ENVELOPE "TO BE OPENED BY MEDICAL OFFICER ONLY."

32. PHYSICIAN'S SUMMARY AND ELABORATION OF ALL PERTINENT DATA (Physician shall comment on all positive answers in items 15 through 31. Physician may develop by interview any additional medical history he deems important, and record any significant findings here.)

scarlet fever + mumps in childhood -
no sequelae

High - frequency hearing loss, mild, prob.
2° long exposure to firearms.

Rectal surgery, age 24 - no recent problem.

TYPED OR PRINTED NAME OF PHYSICIAN OR EXAMINER

DATE

18 Dec 69

SIGNATURE

NUMBER OF ATTACHED
SHEETS

b6

REPORT OF MEDICAL HISTORY

U.S. Civil Service Employees and Applicants

F.B.I.

Budget Bureau
Approved 50-R0390

This information is for official and medically-confidential use only and will not be released to unauthorized persons.

1. LAST NAME—FIRST NAME—MIDDLE NAME Gale, James H.		2. TITLE OF POSITION Assistant Director	3. SOCIAL SECURITY NUMBER 294 01 8383
4. HOME ADDRESS (Number, street or RFD, city or town, State, and ZIP Code) 3307 Rocky Mount Road, Fairfax, Va. 22030		5. PURPOSE OF EXAMINATION Annual	6. DATE OF EXAMINATION
7. SEX M	8. TOTAL YEARS GOVERNMENT SERVICE MILITARY 18 months CIVILIAN 27 1/2 yrs	9. AGENCY F.B.I.	10. ORGANIZATION UNIT
11. DATE OF BIRTH 9.28.21	12. PLACE OF BIRTH Cleveland, Ohio	13. EXAMINING FACILITY OR EXAMINER, AND ADDRESS (Including ZIP Code)	
14. STATEMENT OF EXAMINEE'S PRESENT HEALTH AND MEDICATIONS CURRENTLY USED (Follow by description of past history, if complaint exists)			

15. DO YOU (Please check at left of each item):		16. HAVE YOU EVER (Please check at left of each item):	
YES	NO	YES	NO
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
(Check each item)		(Check each item)	
WEAR GLASSES OR CONTACT LENSES		LIVED WITH ANYONE WHO HAD TUBERCULOSIS	
<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	
HAVE VISION IN BOTH EYES		COUGHED UP BLOOD	
<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	
WEAR A HEARING AID		BLED EXCESSIVELY AFTER INJURY OR TOOTH EXTRACTION	
<input checked="" type="checkbox"/>		<input type="checkbox"/>	
STUTTER OR STAMMER HABITUALLY			
<input checked="" type="checkbox"/>			
WEAR A BRACE OR BACK SUPPORT			
<input checked="" type="checkbox"/>			

17. HAVE YOU EVER HAD OR HAVE YOU NOW (Please check at left of each item):			
YES	NO	DON'T KNOW	(Check each item)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	SCARLET FEVER, ERYSIPELAS
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	DIPHTHERIA
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	RHEUMATIC FEVER
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	SWOLLEN OR PAINFUL JOINTS
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	MUMPS
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	COLOR BLINDNESS
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	FREQUENT OR SEVERE HEADACHE
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	DIZZINESS OR FAINTING SPELLS
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	EYE TROUBLE
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	EAR, NOSE, OR THROAT TROUBLE
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	RUNNING EARS
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	HEARING LOSS
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	CHRONIC OR FREQUENT COLDS
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	SEVERE TOOTH OR GUM TROUBLE
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	SINUSITIS
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	HAY FEVER
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	HEAD INJURY
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	SKIN DISEASES
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	GOITER
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	TUBERCULOSIS
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	SOAKING SWEATS (Night sweats)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ASTHMA
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	SHORTNESS OF BREATH
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	PAIN OR PRESSURE IN CHEST
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	CHRONIC COUGH
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	PALPITATION OR POUNDING HEART
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	HIGH OR LOW BLOOD PRESSURE
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	CRAMPS IN YOUR LEGS
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	FREQUENT INDIGESTION
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	STOMACH, LIVER, OR INTESTINAL TROUBLE
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	GALL BLADDER TROUBLE OR GALLSTONES
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	JAUNDICE
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ANY ADVERSE REACTION TO SERUM, DRUG, OR MEDICINE
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	BROKEN BONES
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	TUMOR, GROWTH, CYST, OR CANCER
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	RUPTURE/HERNIA
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	APPENDICITIS
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	PILES OR RECTAL DISEASE
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	FREQUENT OR PAINFUL URINATION
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	KIDNEY STONE OR BLOOD IN URINE
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	SUGAR OR ALBUMIN IN URINE
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	BOILS
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	RECENT GAIN OR LOSS OF WEIGHT
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ARTHRITIS OR RHEUMATISM
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	BONE, JOINT, OR OTHER DEFORMITY
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	LAMENESS
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	LOSS OF ARM, LEG, FINGER, OR TOE
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	PAINFUL OR "TRICK" SHOULDER OR ELBOW
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	RECURRENT BACK PAIN
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	"TRICK" OR LOCKED KNEE
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	FOOT TROUBLE
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	NEURITIS
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	PARALYSIS (Inc. infantile)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	EPILEPSY OR FITS
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	CAR, TRAIN, SEA, OR AIR SICKNESS
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	FREQUENT TROUBLE SLEEPING
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	FREQUENT OR TERRIFYING NIGHTMARES
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	DEPRESSION OR EXCESSIVE WORRY
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	LOSS OF MEMORY OR AMNESIA
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	NERVOUS TROUBLE OF ANY SORT
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ANY DRUG OR NARCOTIC HABIT
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	EXCESSIVE DRINKING HABIT
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	PERIODS OF UNCONSCIOUSNESS

18. HOW MANY JOBS HAVE YOU HAD IN THE PAST THREE YEARS? one	19. WHAT IS THE LONGEST PERIOD YOU HELD ANY OF THESE JOBS? MONTHS 27 1/2 years	20. WHAT IS YOUR USUAL OCCUPATION? Asst Director - F.B.I.	21. ARE YOU (Check one) <input checked="" type="checkbox"/> RIGHT HANDED <input type="checkbox"/> LEFT HANDED
---	--	---	--

Do Not Destroy
With All Due Respect
U.S. CIVIL SERVICE COMMISSION

OPTIONAL FORM 58
MAY 1968
U.S. CIVIL SERVICE COMMISSION
FPM CHAPTER 293
5058-101

YES	NO	CHECK EACH ITEM YES OR NO. EVERY ITEM CHECKED YES MUST BE FULLY EXPLAINED IN BLANK SPACE ON RIGHT
✓		22. HAVE YOU BEEN REFUSED EMPLOYMENT OR BEEN UNABLE TO HOLD A JOB BECAUSE OF: A. SENSITIVITY TO CHEMICALS, DUST, SUNLIGHT, ETC.
✓		B. INABILITY TO PERFORM CERTAIN MOTIONS
✓		C. INABILITY TO ASSUME CERTAIN POSITIONS
✓		D. OTHER MEDICAL REASONS (If yes, give reasons)
		23. HAVE YOU EVER WORKED WITH RADIOACTIVE SUBSTANCE?
✓		24. HAVE YOU EVER BEEN DENIED LIFE INSURANCE? (If yes, state reason and give details)
✓		25. HAVE YOU HAD, OR HAVE YOU BEEN ADVISED TO HAVE, ANY OPERATIONS? (If yes, describe and give age at which occurred)
✓		26. HAVE YOU EVER BEEN A PATIENT IN ANY TYPE OF HOSPITAL? (If yes, specify when, where, why, and name of doctor and complete address of hospital)
✓		27. HAVE YOU EVER HAD ANY ILLNESS OR INJURY OTHER THAN THOSE ALREADY NOTED? (If yes, specify when, where, and give details)
✓		28. HAVE YOU CONSULTED OR BEEN TREATED BY CLINICS, PHYSICIANS, HEALERS, OR OTHER PRACTITIONERS WITHIN THE PAST 5 YEARS FOR OTHER THAN MINOR ILLNESSES? (If yes, give complete address of doctor, hospital, clinic, and details)
✓		29. HAVE YOU EVER BEEN REJECTED FOR MILITARY SERVICE BECAUSE OF PHYSICAL, MENTAL, OR OTHER REASONS? (If yes, give date and reason for rejection)
✓		30. HAVE YOU EVER BEEN DISCHARGED FROM MILITARY SERVICE BECAUSE OF PHYSICAL, MENTAL, OR OTHER REASONS? (If yes, give date, reason, and type of discharge: whether honorable, other than honorable, for unfitness or unsuitability)
✓		31. HAVE YOU EVER RECEIVED, IS THERE PENDING, OR HAVE YOU APPLIED FOR PENSION OR COMPENSATION FOR EXISTING DISABILITY? (If yes, specify what kind, granted by whom, and what amount, when, why)

I CERTIFY THAT I HAVE REVIEWED THE FOREGOING INFORMATION SUPPLIED BY ME AND THAT IT IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

I AUTHORIZE ANY OF THE DOCTORS, HOSPITALS, OR CLINICS MENTIONED ABOVE TO FURNISH THE GOVERNMENT A COMPLETE TRANSCRIPT OF MY MEDICAL RECORD FOR PURPOSES OF PROCESSING MY APPLICATION FOR THIS EMPLOYMENT OR SERVICE.

TYPED OR PRINTED NAME OF EXAMINEE

James H. Gale

SIGNATURE

James H. Gale

NOTE: HAND TO THE DOCTOR OR NURSE, OR IF MAILED MARK ENVELOPE "TO BE OPENED BY MEDICAL OFFICER ONLY."

32. PHYSICIAN'S SUMMARY AND ELABORATION OF ALL PERTINENT DATA (Physician shall comment on all positive answers in items 15 through 31. Physician may develop by interview any additional medical history he deems important, and record any significant findings here.)

History of rectal surgery 1946. no sequelae

High tone hearing loss due to gammafire
Vision corrected by glasses.

TYPED OR PRINTED NAME OF PHYSICIAN OR EXAMINER

DATE

30 Oct

NUMBER OF ATTACHED SHEETS

PRINTING OFFICE : 1968 O-307-584

b6

PREVIOUS E.C.G.

CLINICAL RECORD

ELECTROCARDIOGRAPHIC RECORD

CLINICAL IMPRESSION

MEDICATION

EMERGENCY
ROUTINE

PODSIDE
TUBULAR

AGE 44 SEX M RACE CAUC HEIGHT 73 1/2 WEIGHT 185 B P

SIGNATURE OF WARD PHYSICIAN

DATE 12/13/65

RHYTHM

AXIS DEVIATION (QRS)

RATES

INTERVALS

T WAVES

PR

QRS

QT

QRS COMPLEXES

RS-T SEGMENT

T WAVES

UNIPOLAR EXTREMITY LEADS (Specify)

PRECORDIAL LEADS (Specify)

SUMMARY, SERIAL CHANGES, AND IMPLICATIONS:

NO SIGNIFICANT CHANGE SINCE 12/14/64

WITHIN NORMAL LIMITS

NO.

SIGNATURE

ECG

PATIENT'S IDENTIFICATION (For type, middle, and last, first, and last)

on reverse

TITLE

b6

DATE

12/13/65

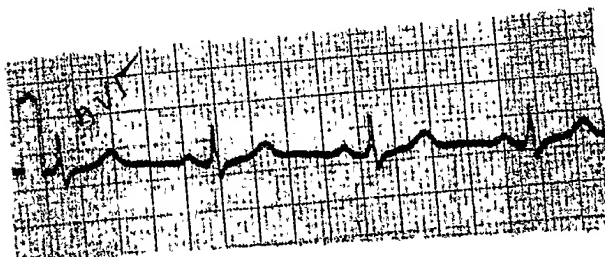
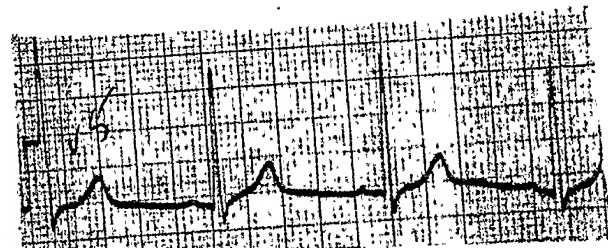
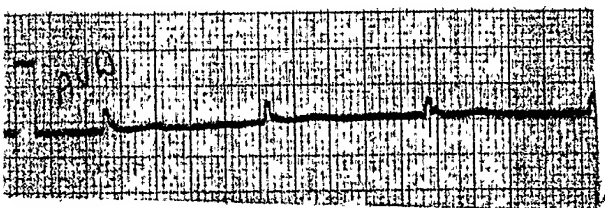
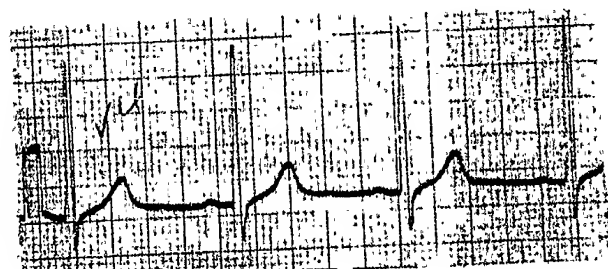
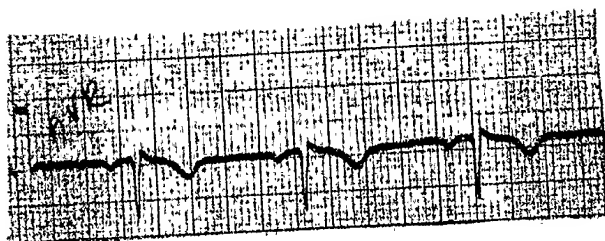
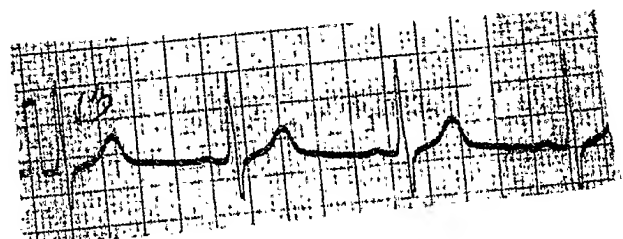
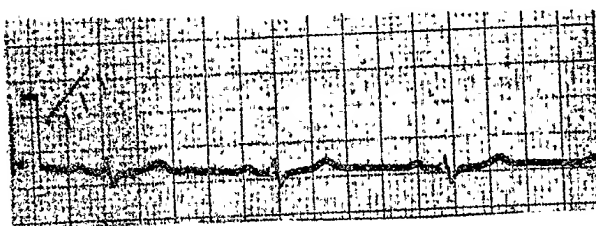
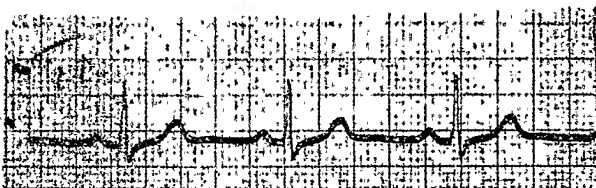
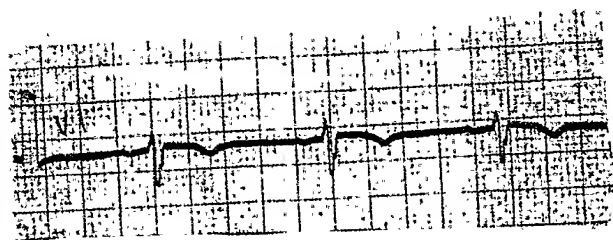
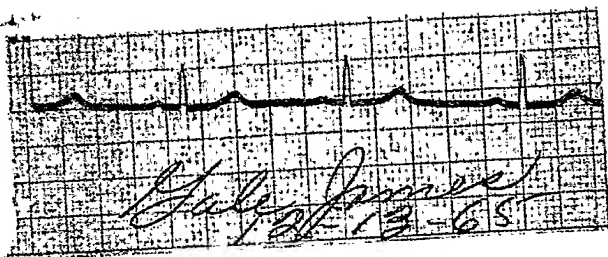
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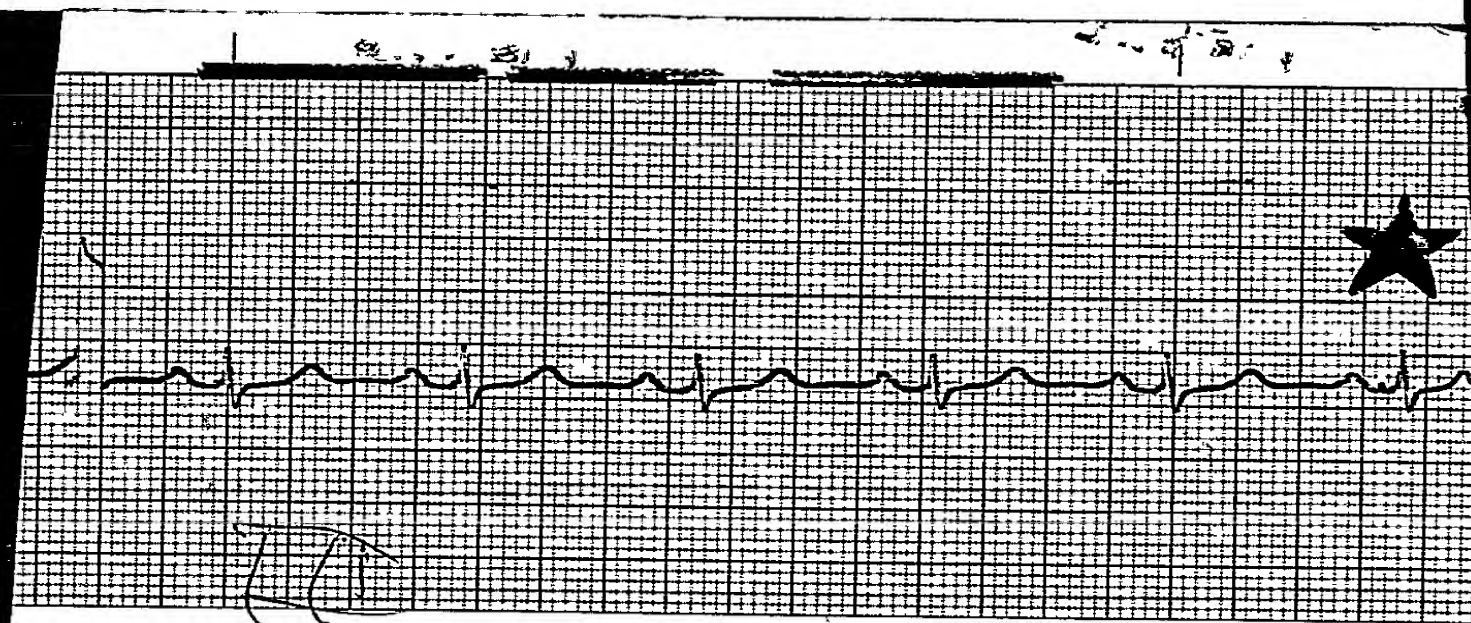
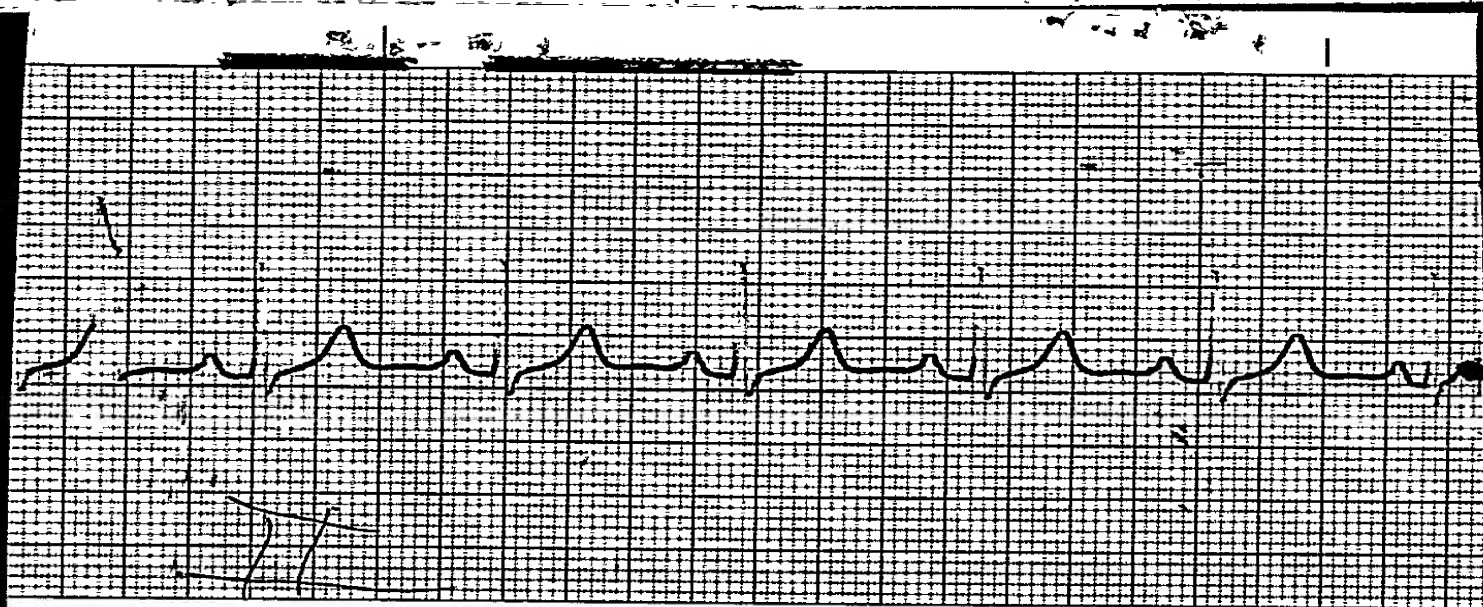
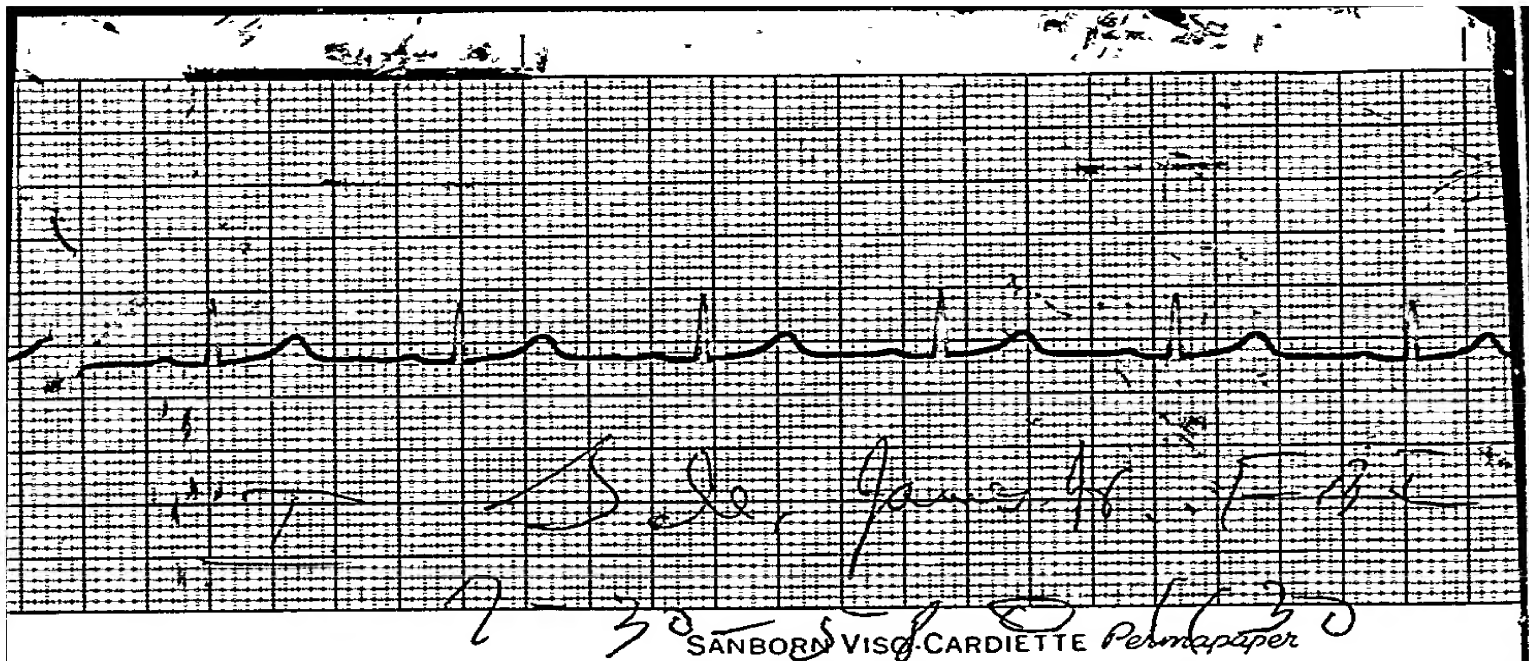
ELECTROCARDIOGRAPHIC RECORD
Standard Form 520

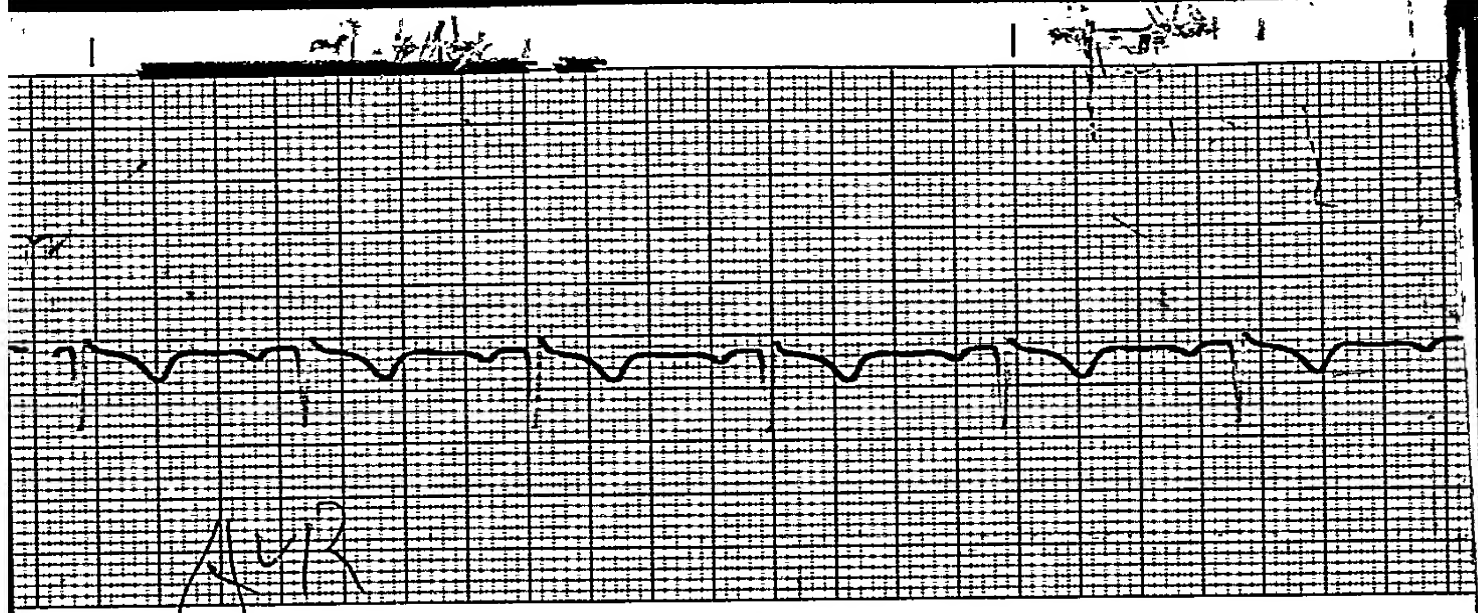
GALE, CLARES H.

ASST. DIR. - FBI

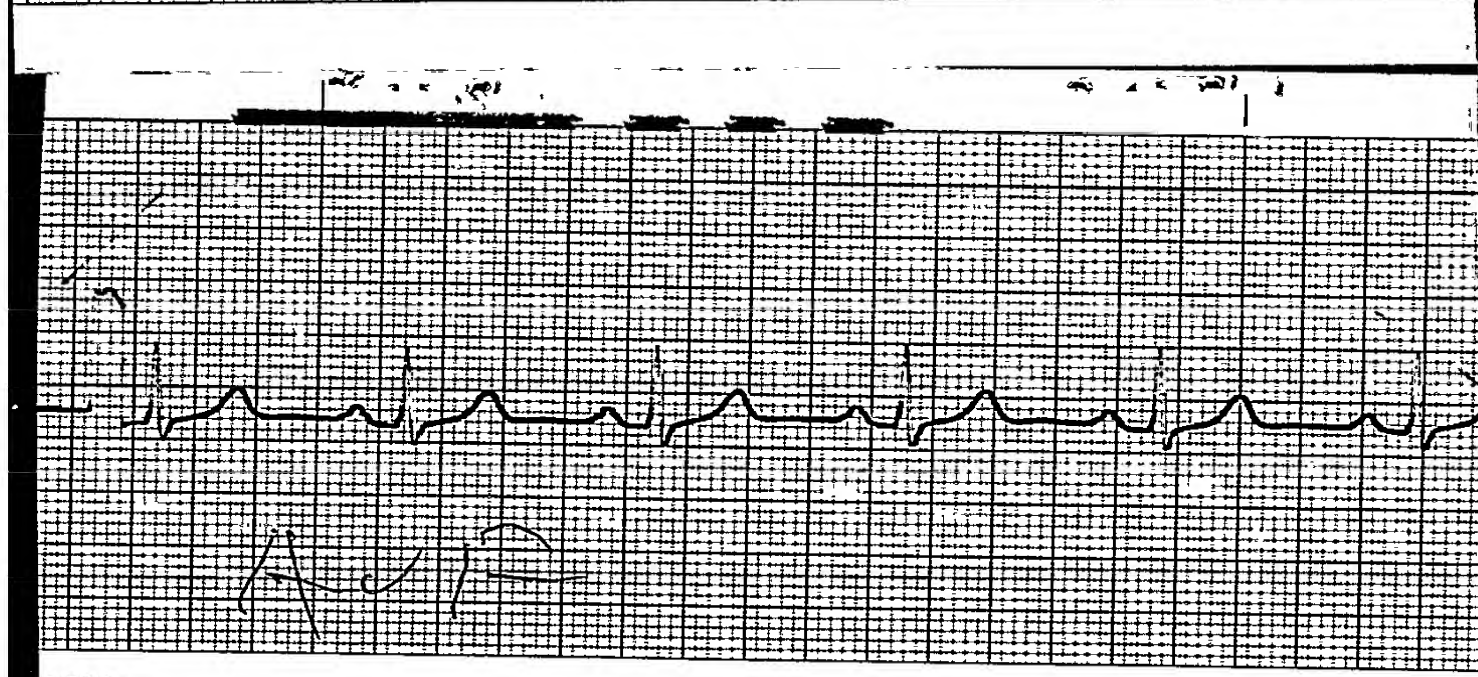
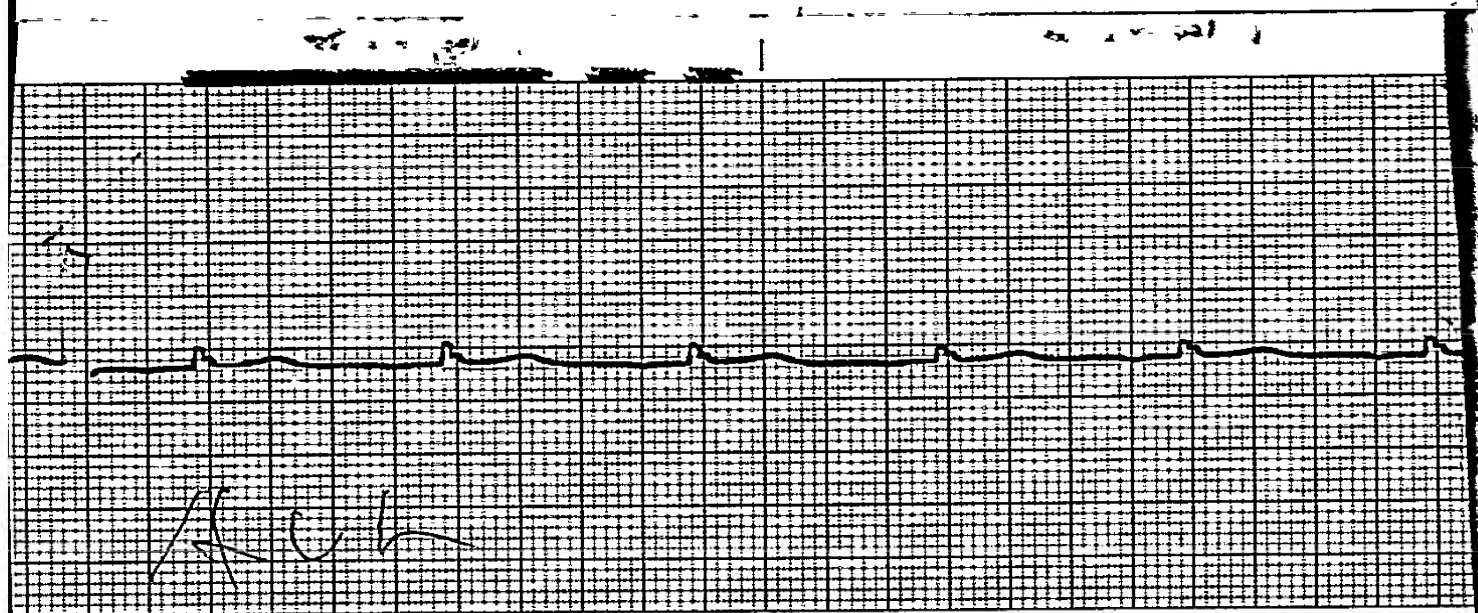
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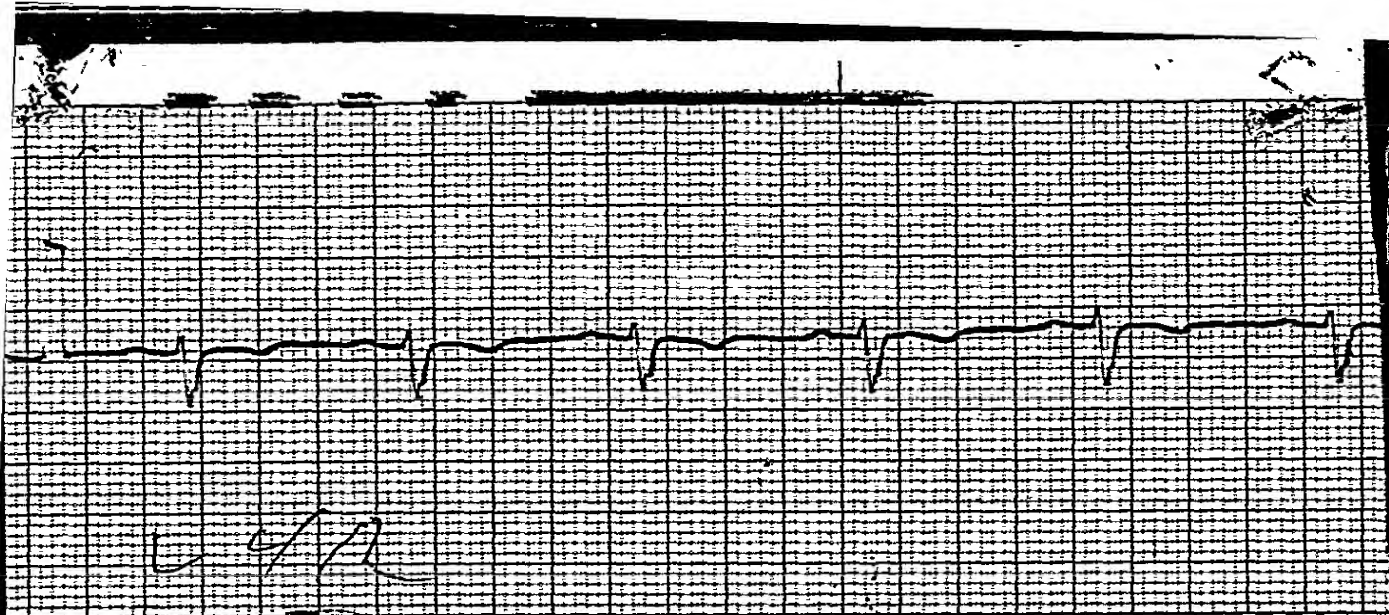




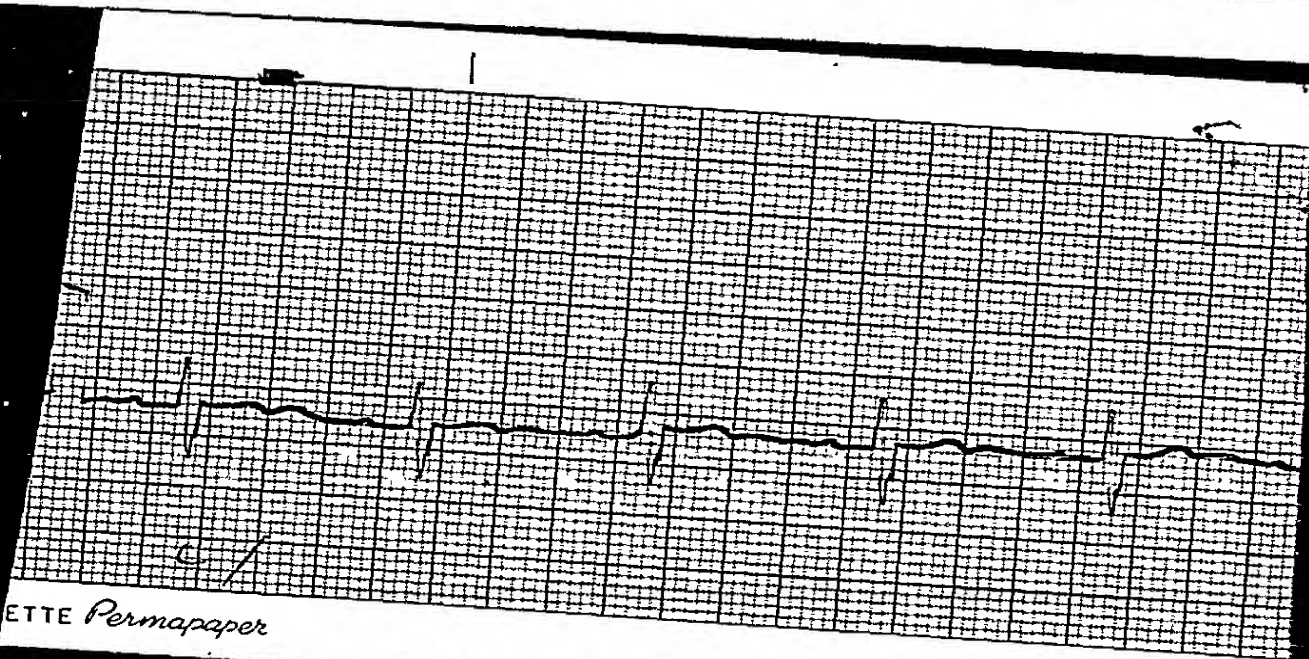
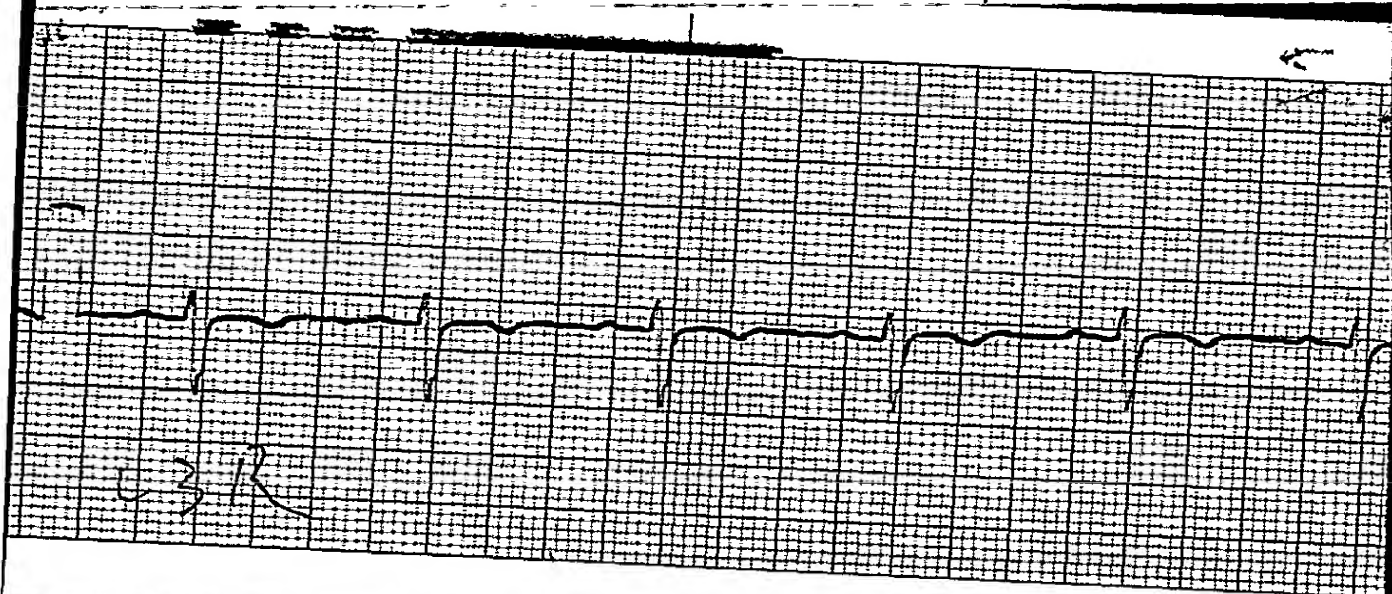


SANBORN VISO-CARD



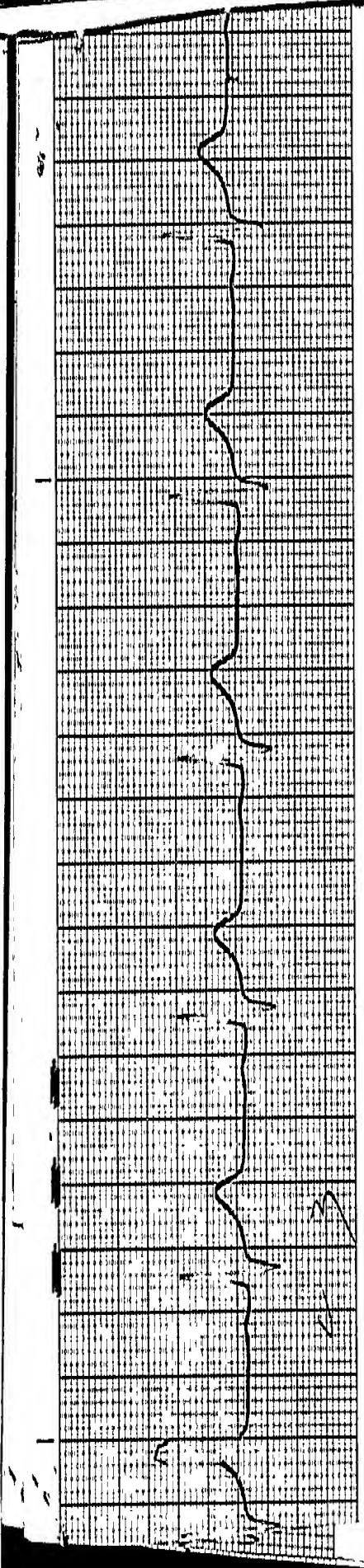
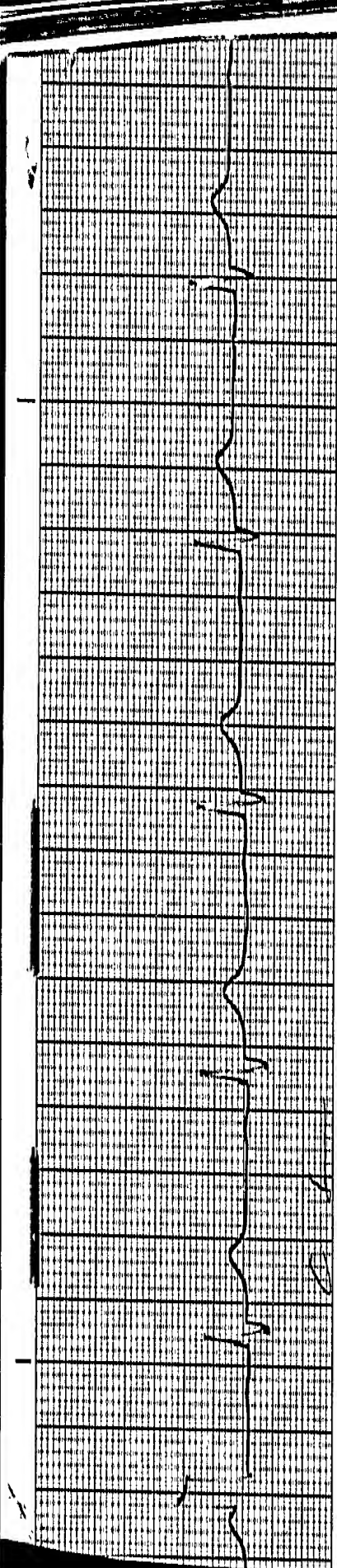


SANBORN VISO-CARDIETTE



ETTE Permapaper

SANBORN VIS



CLINICAL RECORD						ELECTROCARDIOGRAPHIC RECORD		PREVIOUS ECG	
CLINICAL IMPRESSION						MEDICATION		<input type="checkbox"/> YES <input type="checkbox"/> NO	
								<input type="checkbox"/> EMERGENCY <input type="checkbox"/> BEDSIDE <input type="checkbox"/> ROUTINE <input type="checkbox"/> AMBULANT	
AGE	SEX	RACE	HEIGHT	WEIGHT	B. P.	SIGNATURE OF WARD PHYSICIAN			DATE
36	M		74	176					7/30/58 @ 1130
RHYTHM						AXIS DEVIATION (QRS)		RATES	
Normal sinus						Plus 45°		AURIC. VENT. 70	
INTERVALS						P WAVES			
PR .18 QRS .06 QT .36									
QRS COMPLEXES									
RS-T SEGMENT						T WAVES			
UNIPOLAR EXTREMITY LEADS (Specify)									
PRECORDIAL LEADS (Specify)									

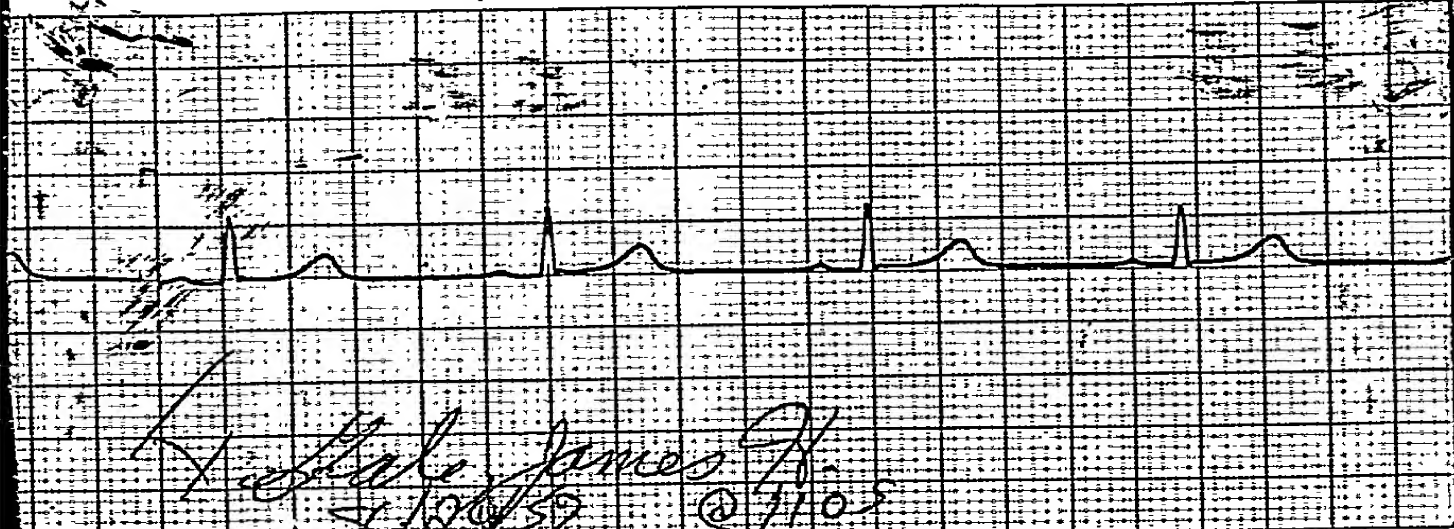
SUMMARY, SERIAL CHANGES, AND IMPLICATIONS:

1. Within normal limits.
2. No significant change since 8/20/57.

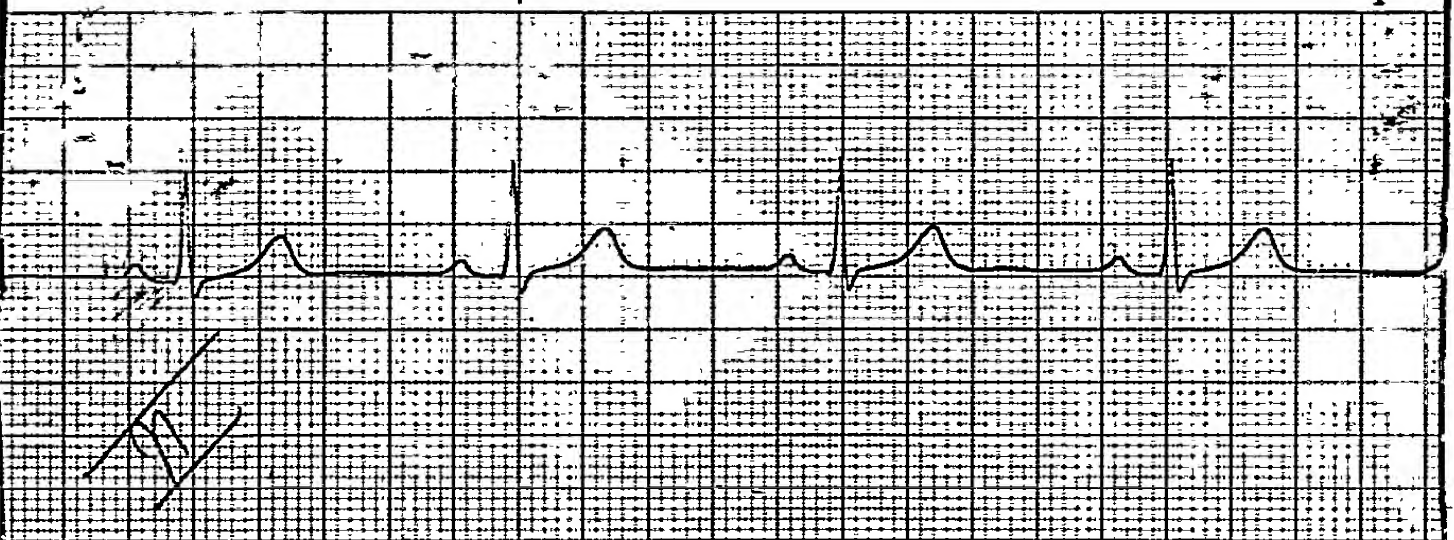
NO.		DATE	
ECG 27429		8/2/58	
PATIENT'S IDENTIFICATION		REGISTER NO.	
GALE, JAMES H FBI		GDR MC TUB NAV	
NNMC USNH BETHESDA, MD.		WARD NO.	
		Staff Clinic	

GALE, JAMES H FBI
NNMC USNH BETHESDA, MD.

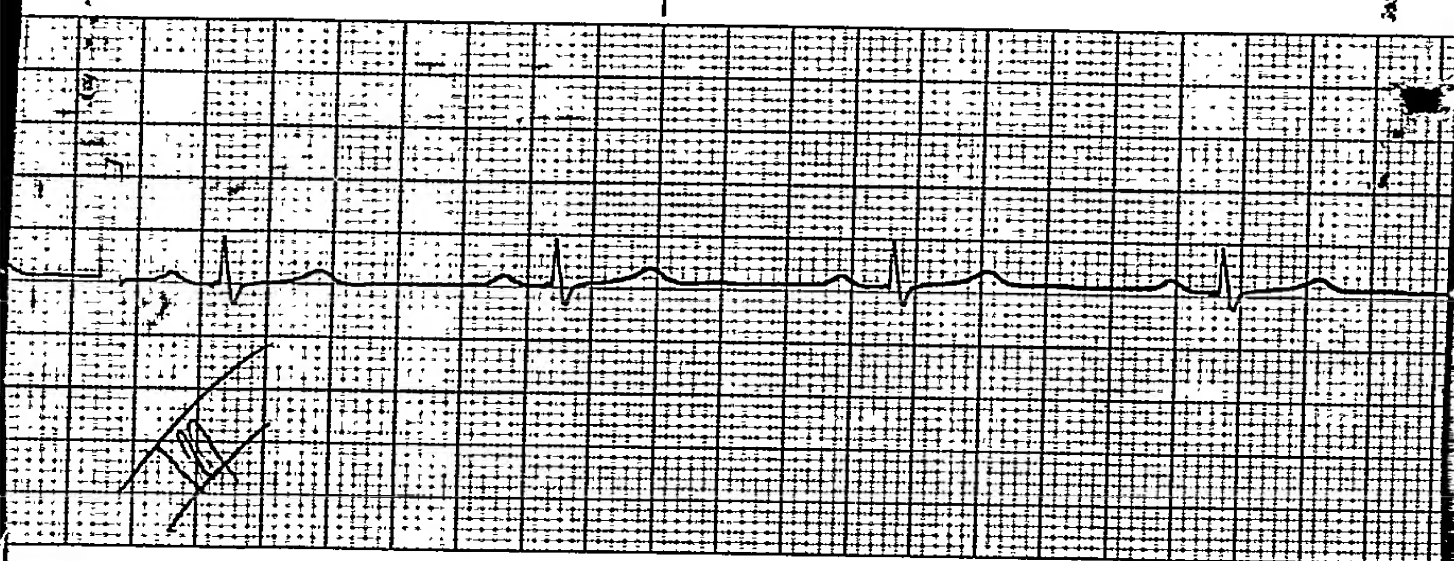
ELECTROCARDIOGRAPHIC RECORD
Standard Form 520
(Attach findings to S. F. 507)

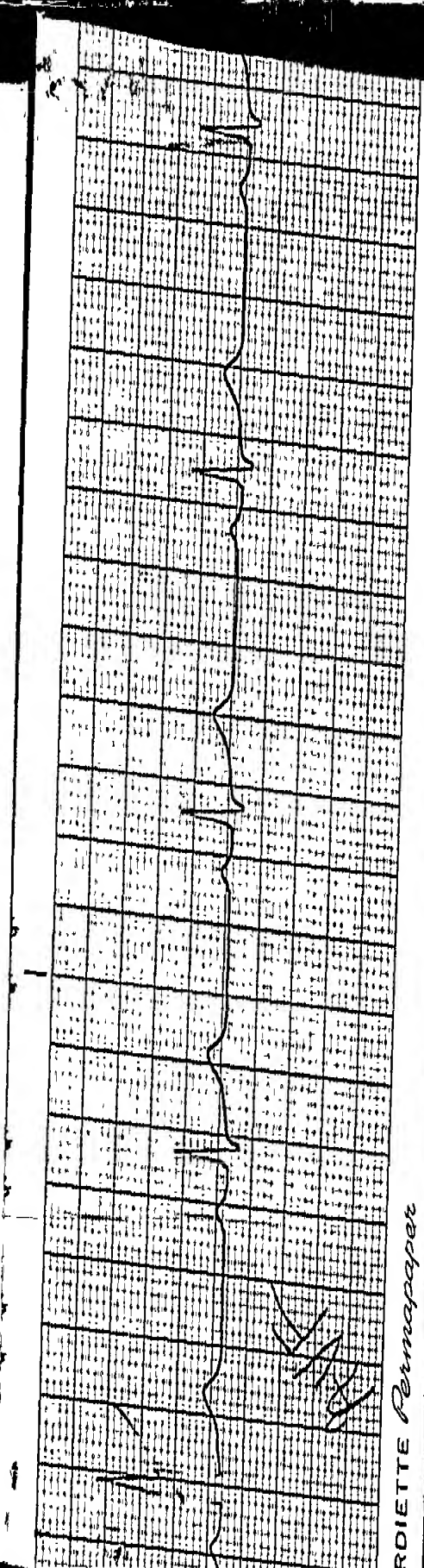
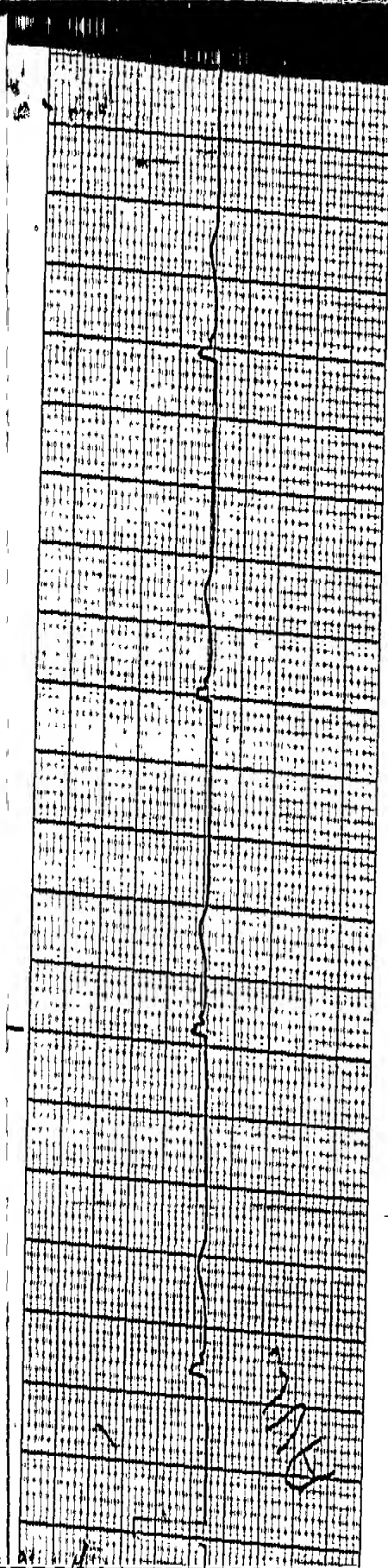
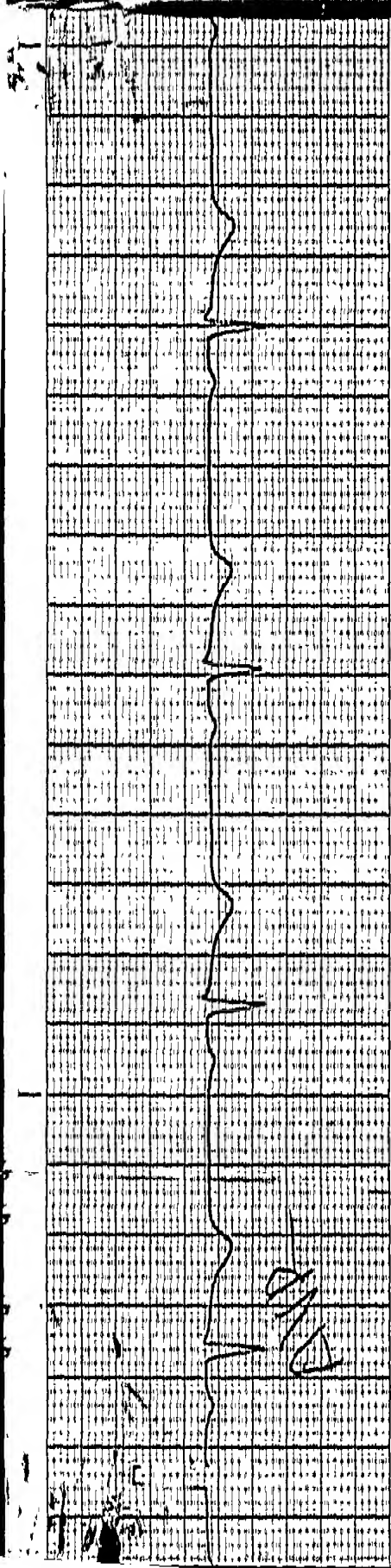


ETTE Perm

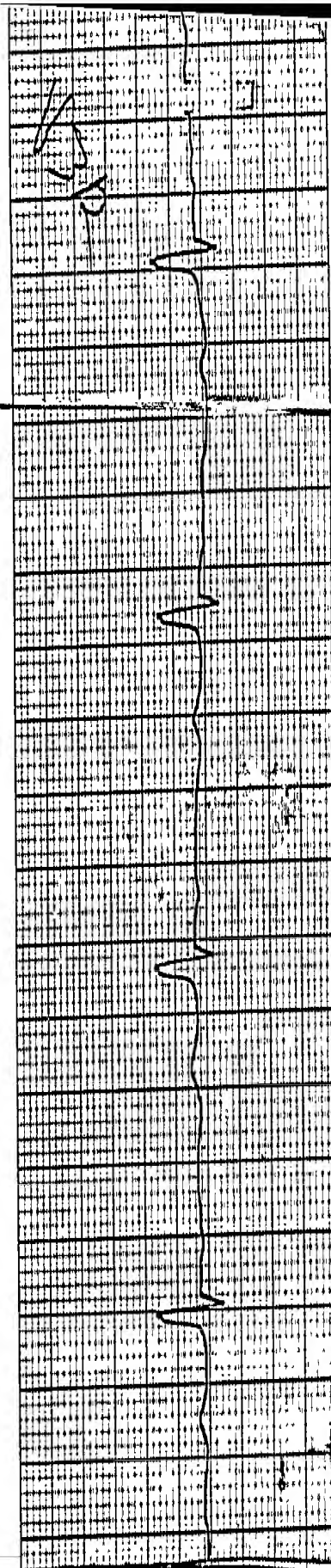
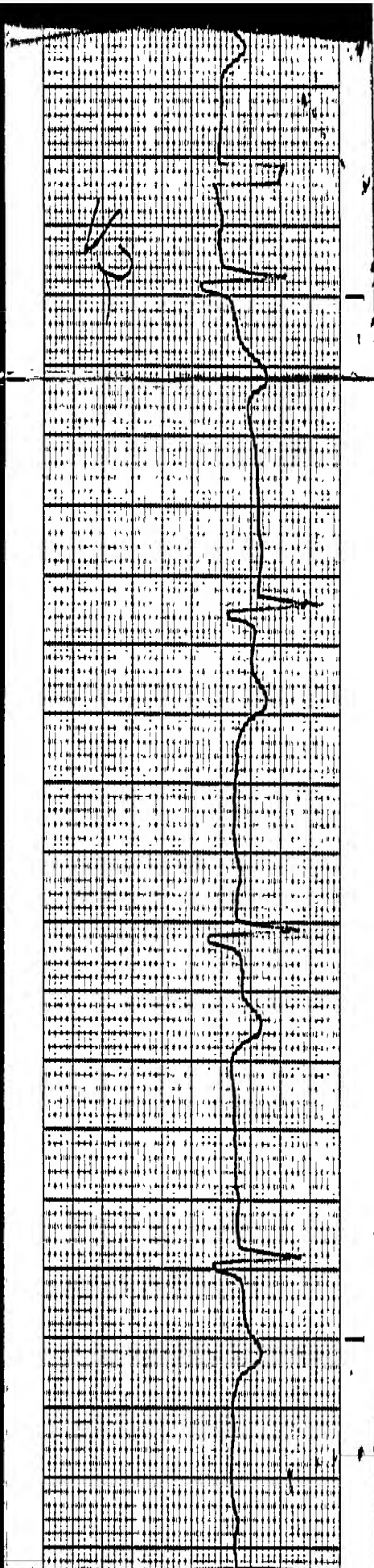


SANBORN VISO-CARDIETTE Permapaper

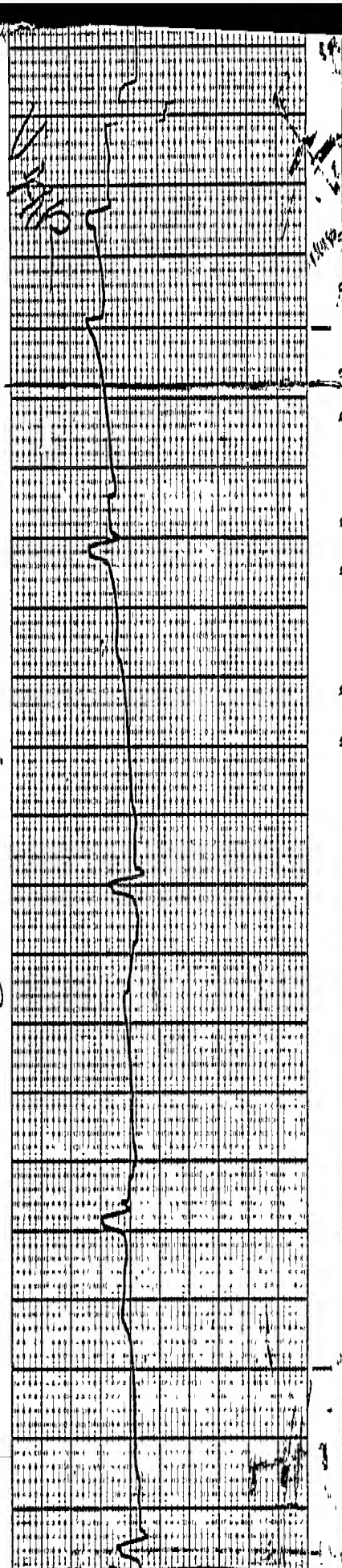


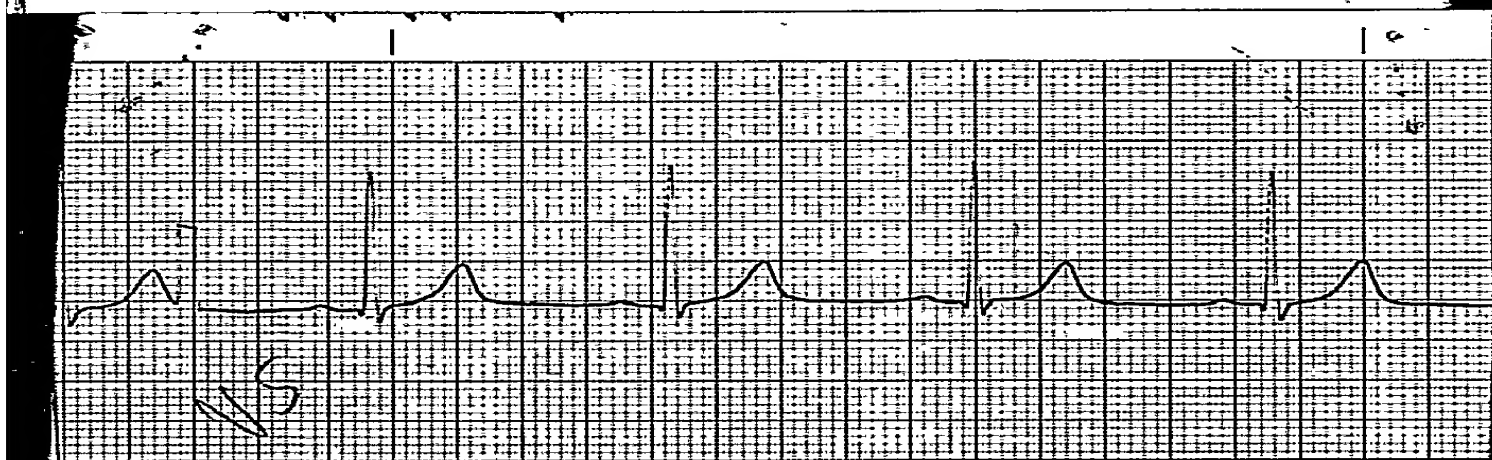
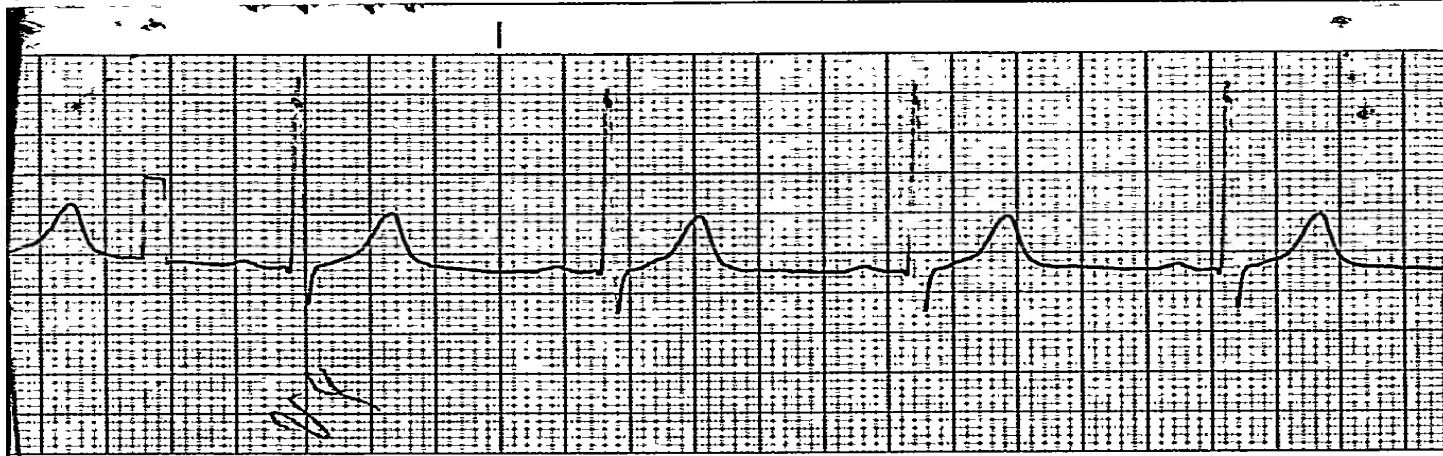
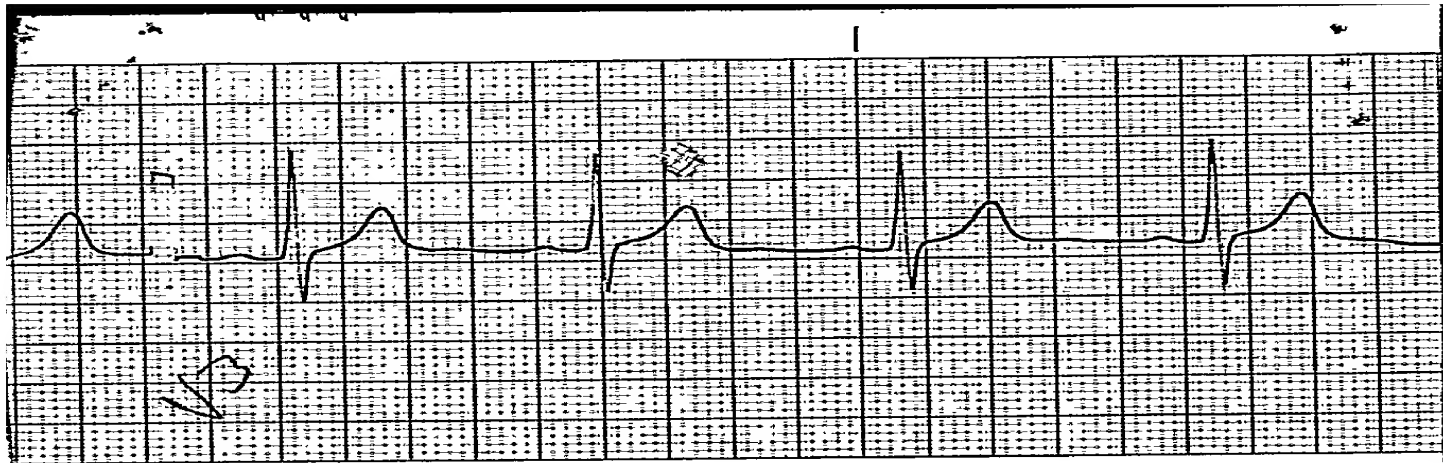


ROLETTE Pernapaper

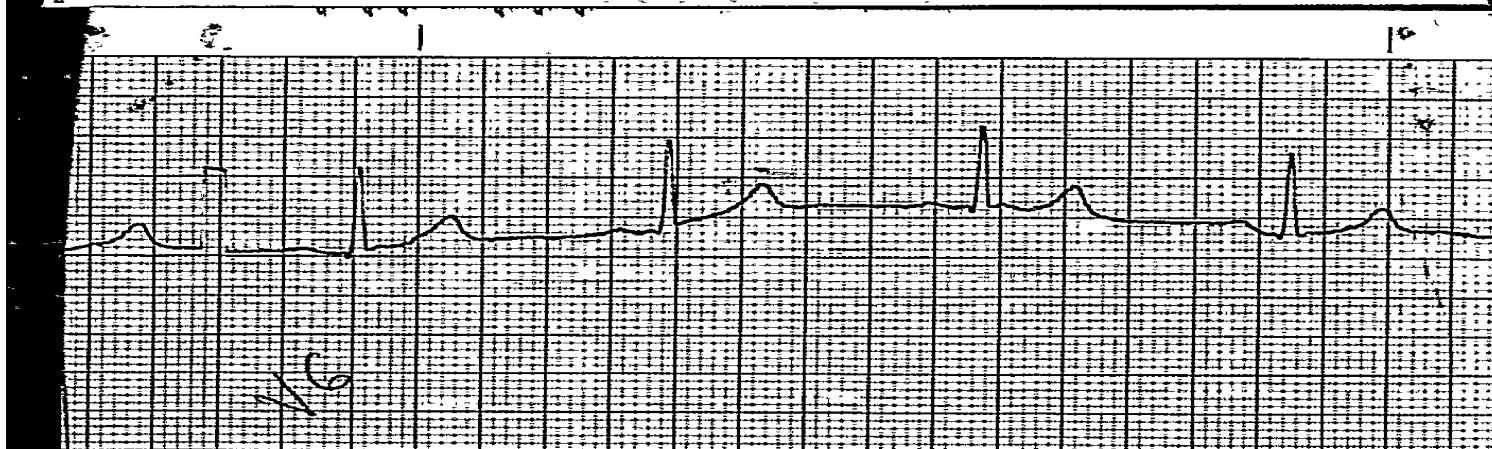


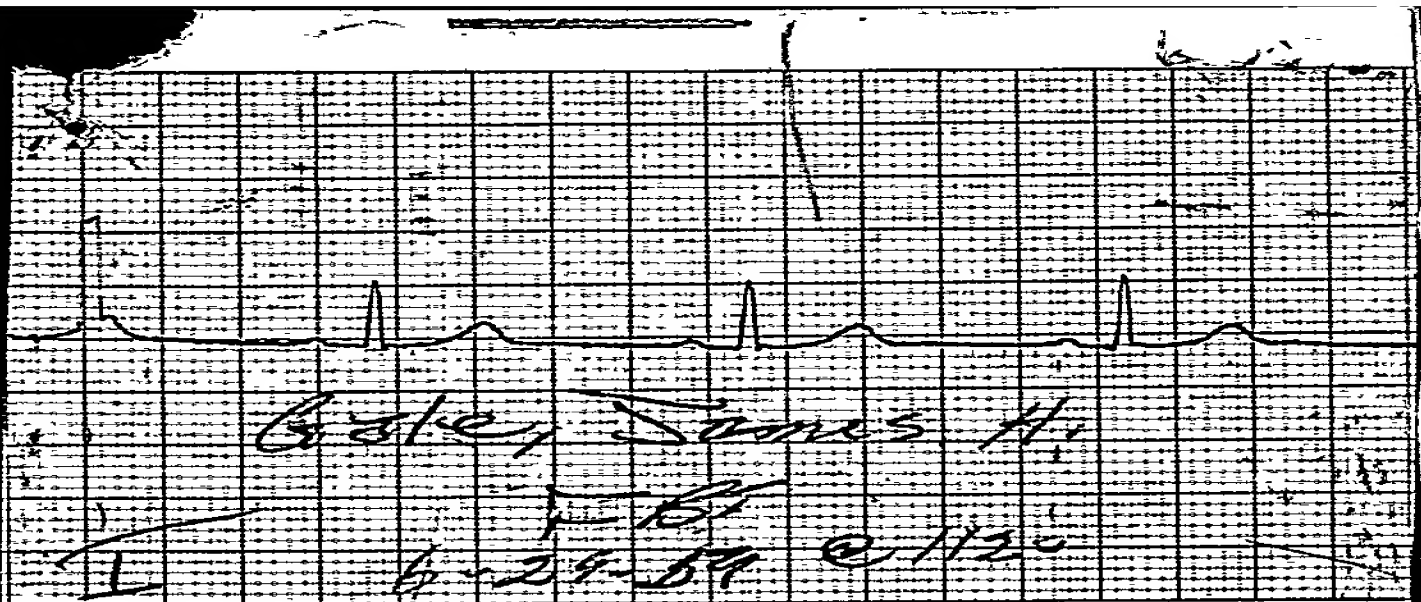
SANBORN VISOCARDIETTE *Permapaper*



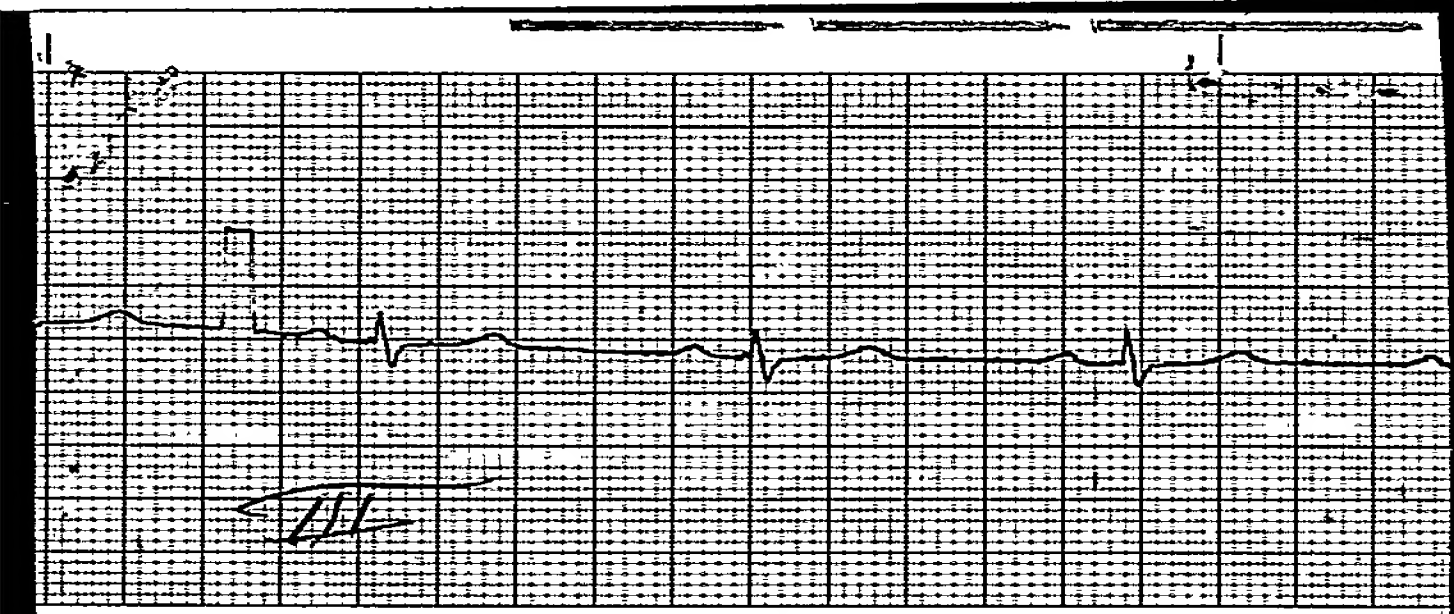
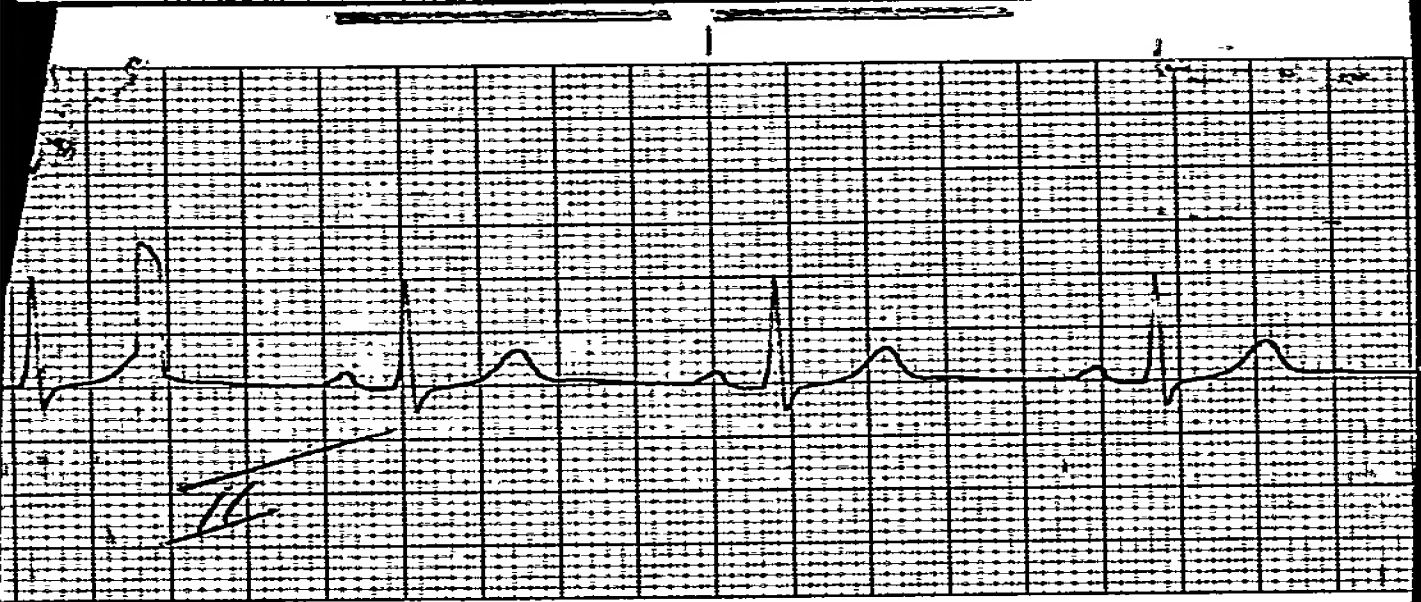


Permapaper

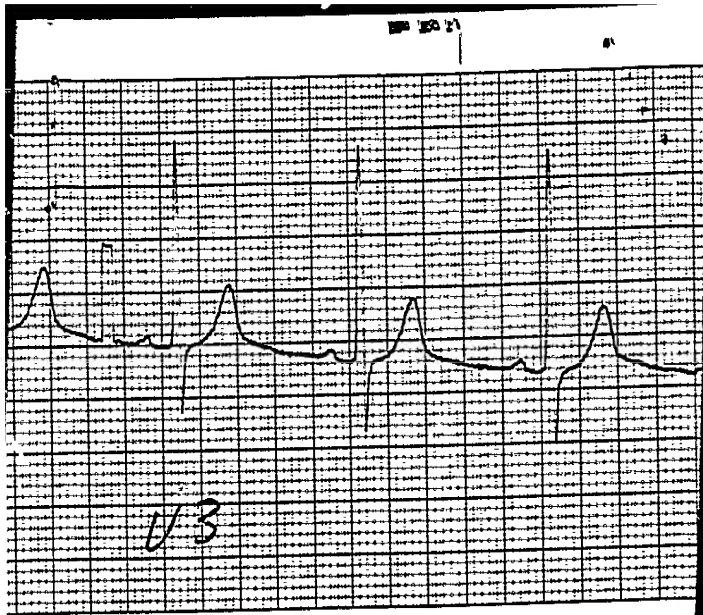




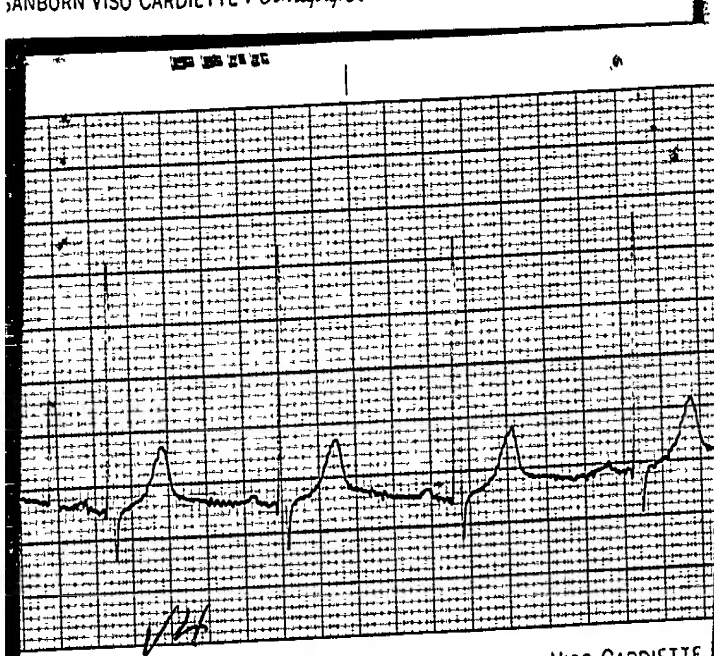
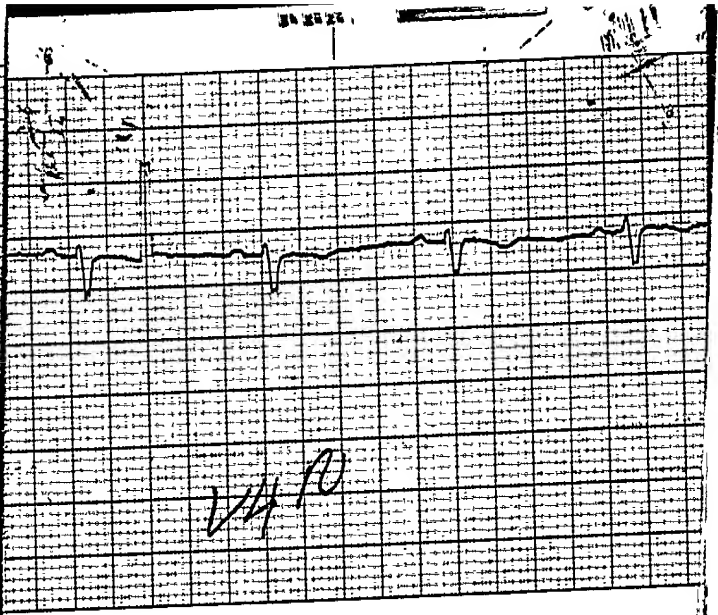
SANBORN VISO CARDIE



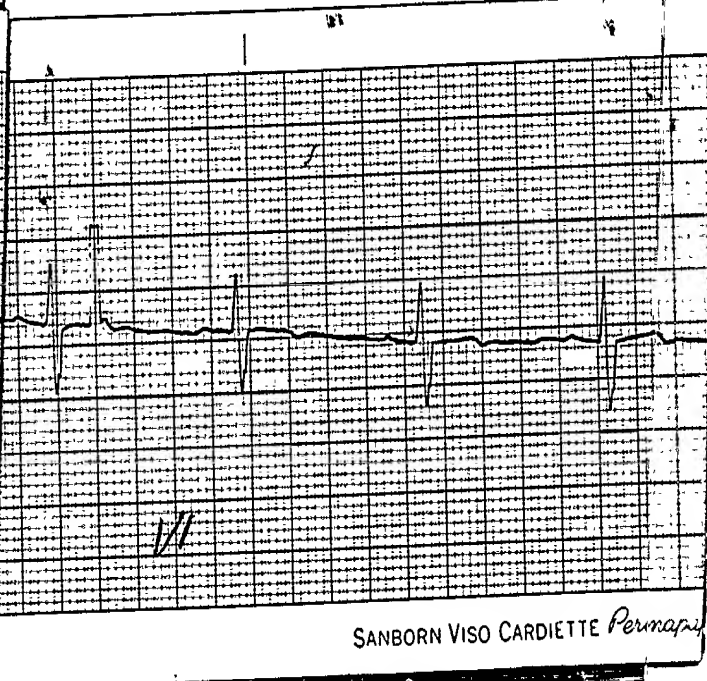
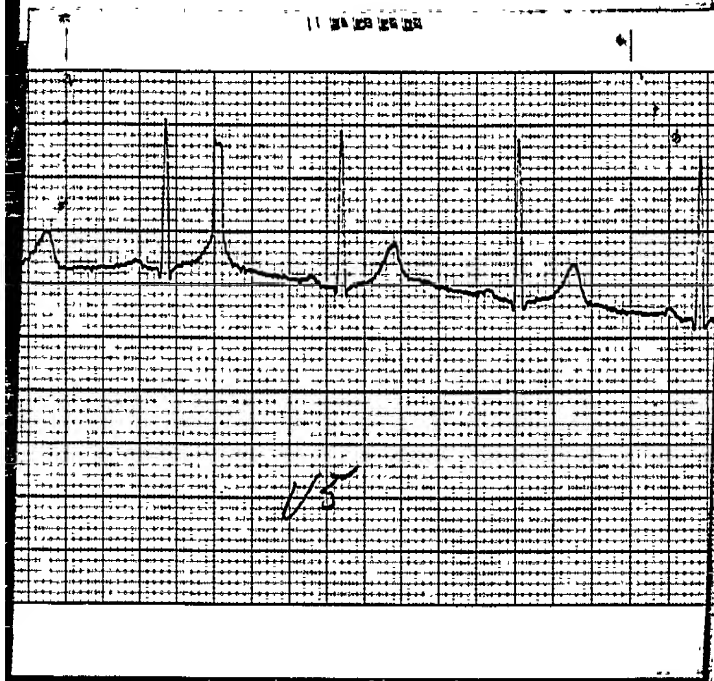
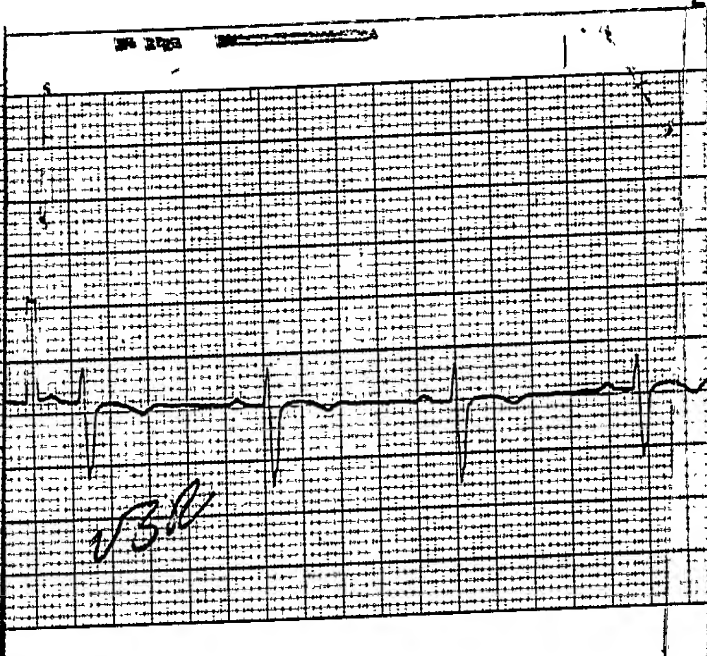
SANBORN VISO CARDIETTE Permapaper



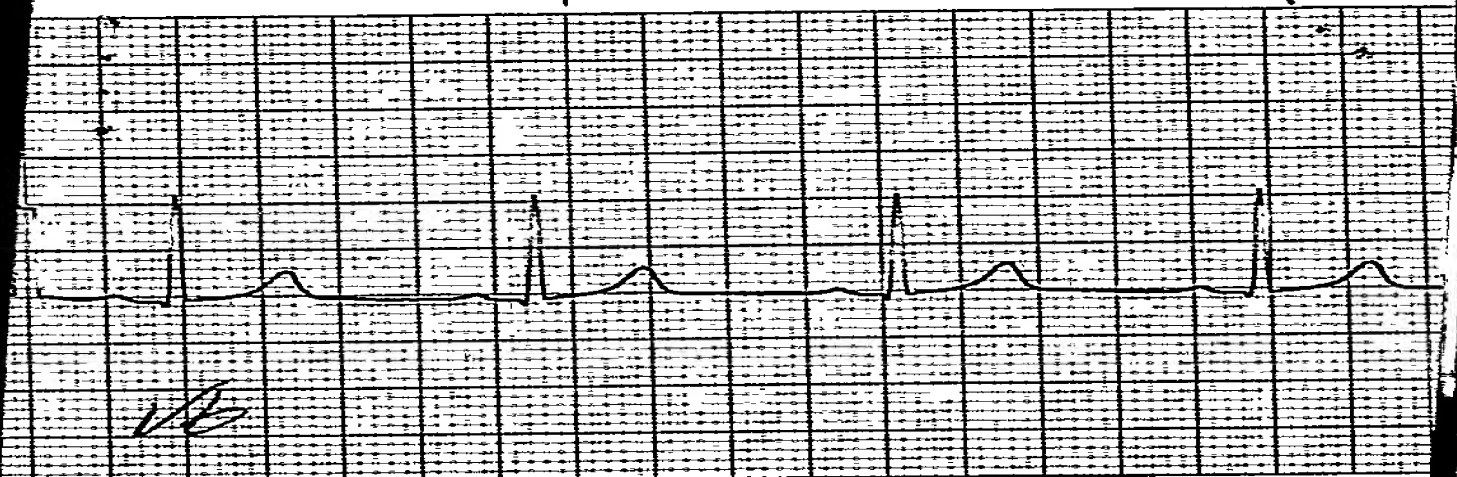
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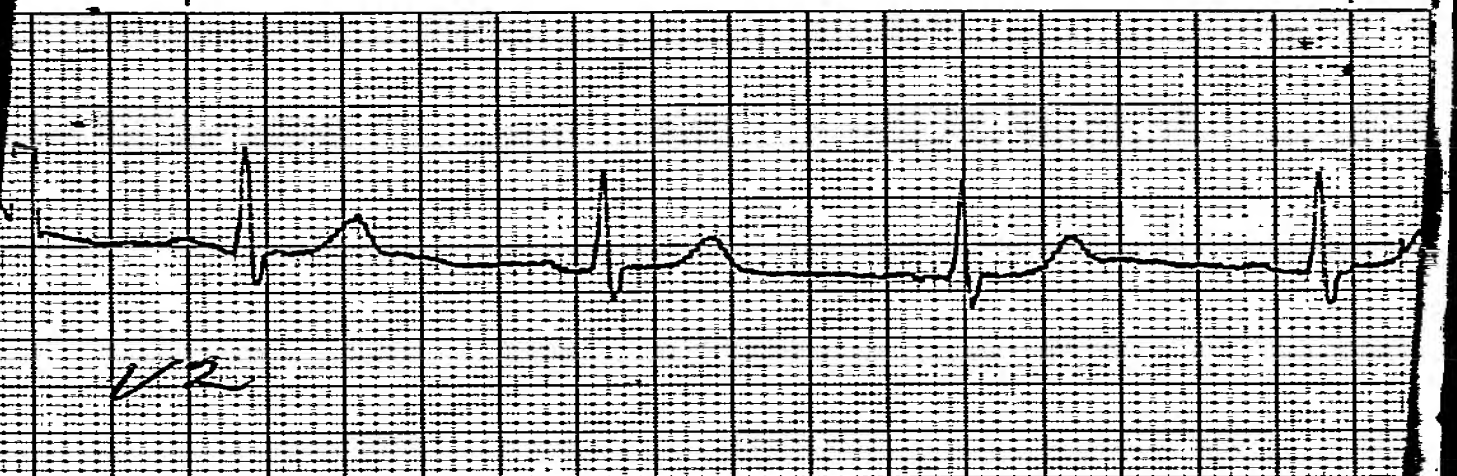
SANBORN VISO CARDIETTE



SANBORN VISO CARDIETTE *Permapaper*



ETTE Permapaper



CLINICAL RECORD						ELECTROCARDIOGRAPHIC RECORD		PREVIOUS ECG	
CLINICAL IMPRESSION						MEDICATION		<input type="checkbox"/> YES <input type="checkbox"/> NO	
								<input type="checkbox"/> EMERGENCY <input type="checkbox"/> BEDSIDE <input type="checkbox"/> ROUTINE <input type="checkbox"/> AMBULANT	
AGE	SEX	RACE	HEIGHT	WEIGHT	B. P.	SIGNATURE OF WARD PHYSICIAN		DATE	
37	M		74"	177				6-29-59°1120	
RHYTHM						AXIS DEVIATION (QRS)		RATES	
Normal sinus rhythm						+45°		AURIC. VENT. 64	
INTERVALS						P WAVES			
PR 2.17 QRS .08 QT									
QRS COMPLEXES									
RS-T SEGMENT						T WAVES			
UNIPOLAR EXTREMITY LEADS (Specify)									
PRECORDIAL LEADS (Specify)									

SUMMARY, SERIAL CHANGES, AND IMPLICATIONS:

1. Within normal limits.
2. No significant change since 7-30-58

(Continue on reverse)

NO.	SIGNATURE	TITLE	DATE
ECG 27429		LT MC USN	6-30-59
PATIENT'S IDENTIFICATION (For typed or written entries give: Name—last, first, middle; grade; date; hospital or medical facility)		REGISTER NO.	WARD NO.
GALE, JAMES H. FBI			STAFF CLINIC
USNH NNM C BETHESDA MD.		ELECTROCARDIOGRAPHIC	

CLINICAL RECORD							ELECTROCARDIOGRAPHIC RECORD			PREVIOUS ECG			
CLINICAL IMPRESSION <i>7</i>							MEDICATION			<input type="checkbox"/> YES	<input type="checkbox"/> NO		
										<input type="checkbox"/> EMERGENCY	<input type="checkbox"/> BEDSIDE		
AGE <i>39</i>							SEX <i>M</i>			<input type="checkbox"/> ROUTINE			<input type="checkbox"/> AMBULANT
										RACE <i>W</i>			DATE
HEIGHT <i>74</i>							WEIGHT <i>172</i>			B. P.			
SIGNATURE										RATES			
RHYTHM										AURIC. VENT.			
INTERVALS							P WAVES						
PR							QRS			QT			
QRS COMPLEXES													
RS-T SEGMENT							T WAVES						
UNIPOLAR EXTREMITY LEADS (Specify)													

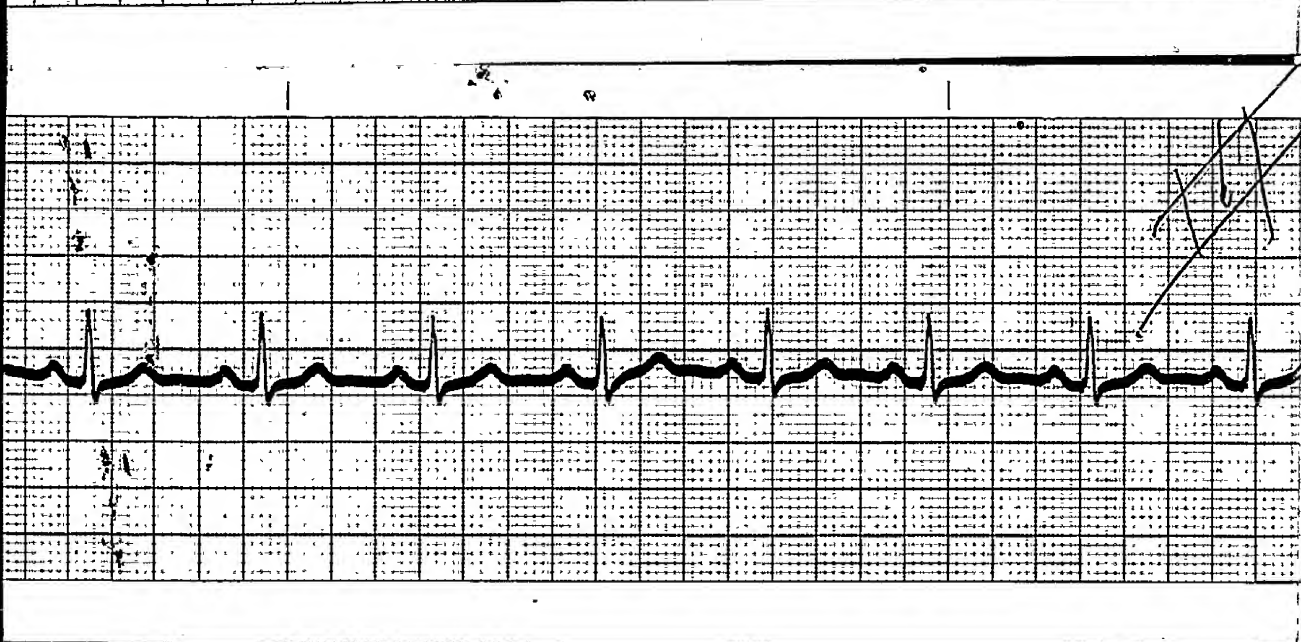
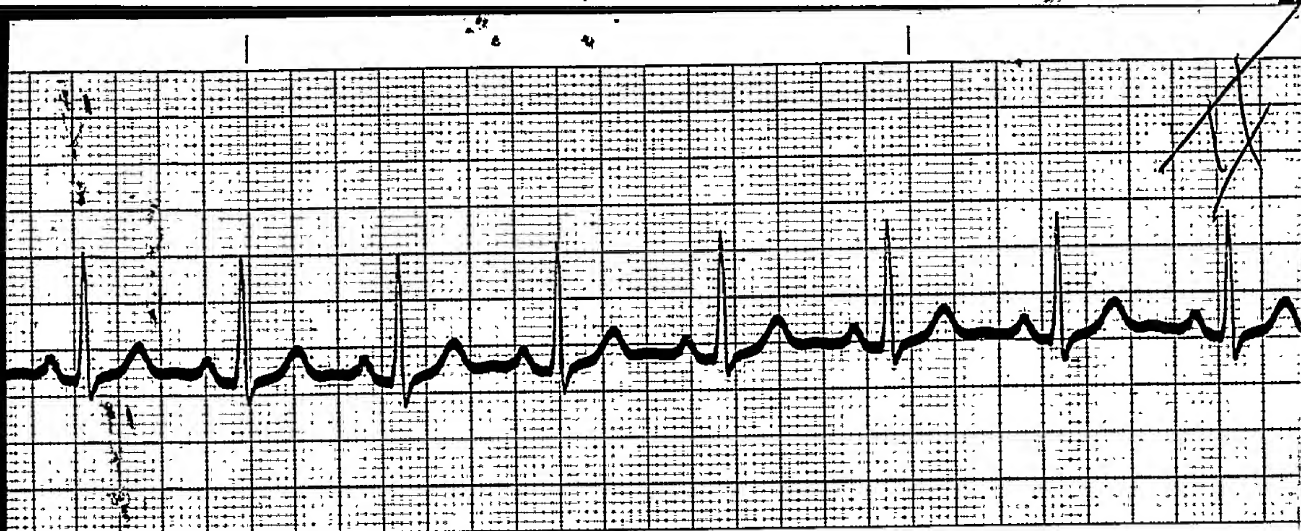
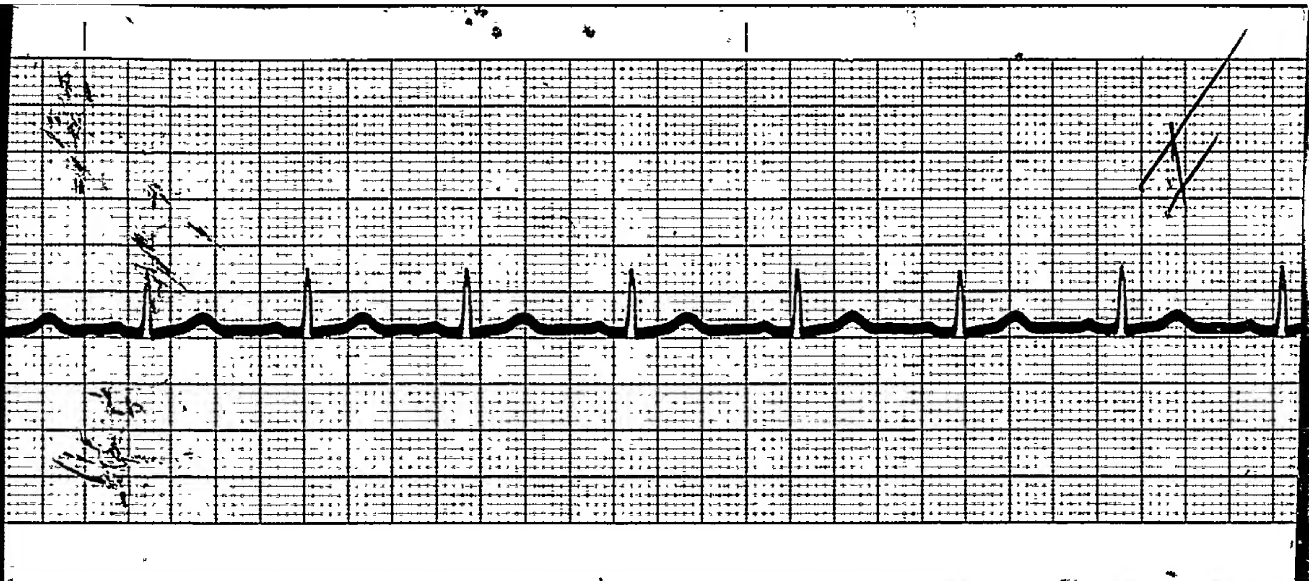
PRECORDIAL LEADS (Specify)

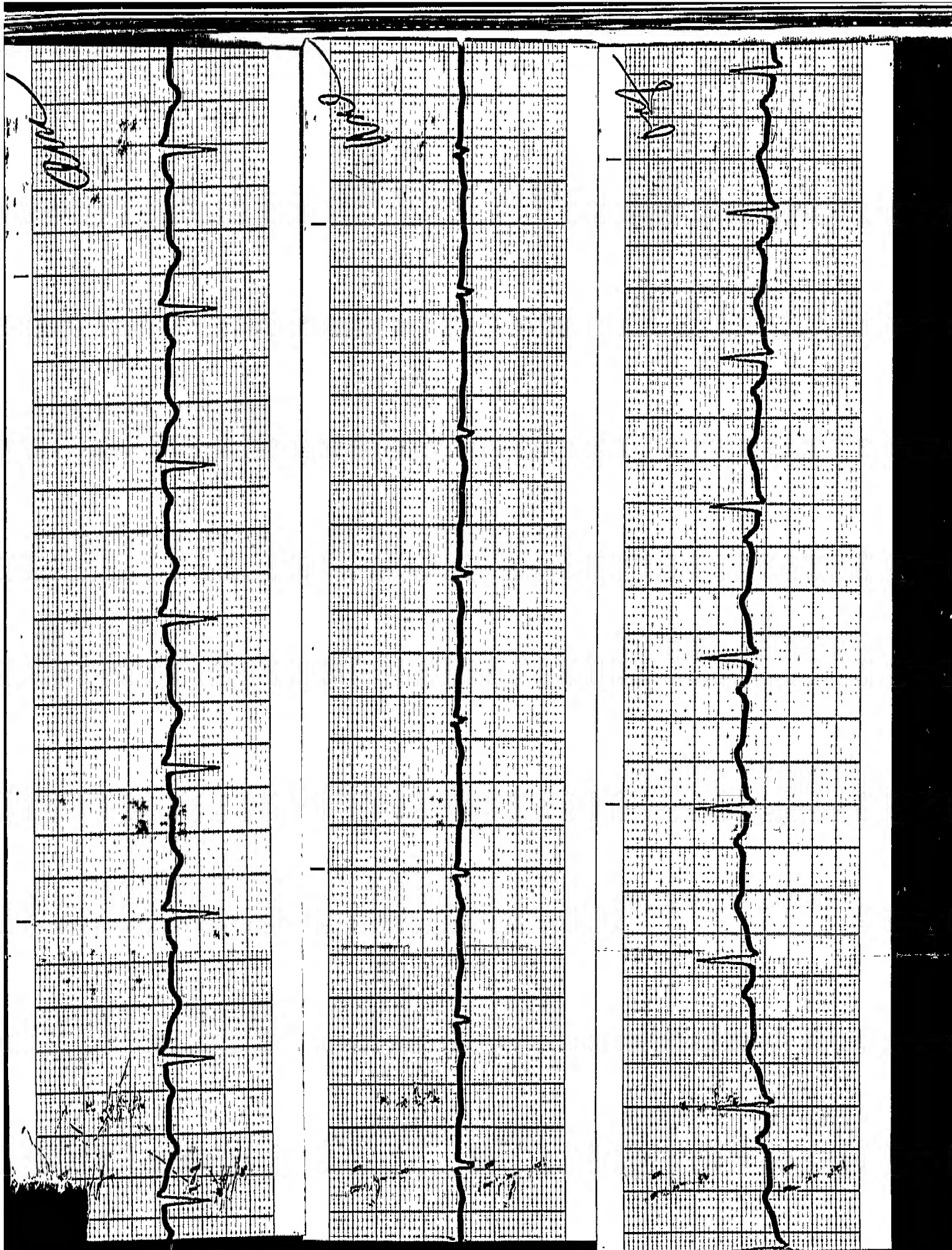
SUMMARY, SERIAL CHANGES, AND IMPLICATIONS:

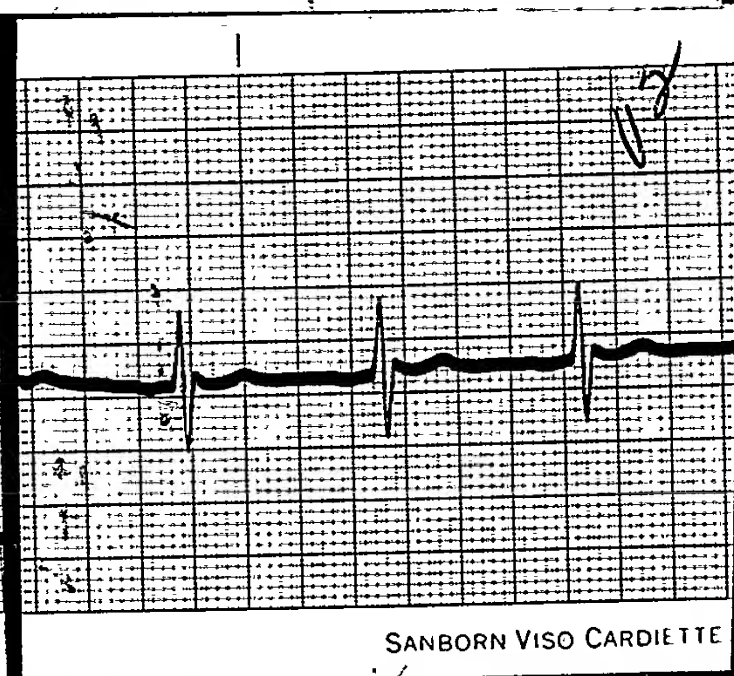
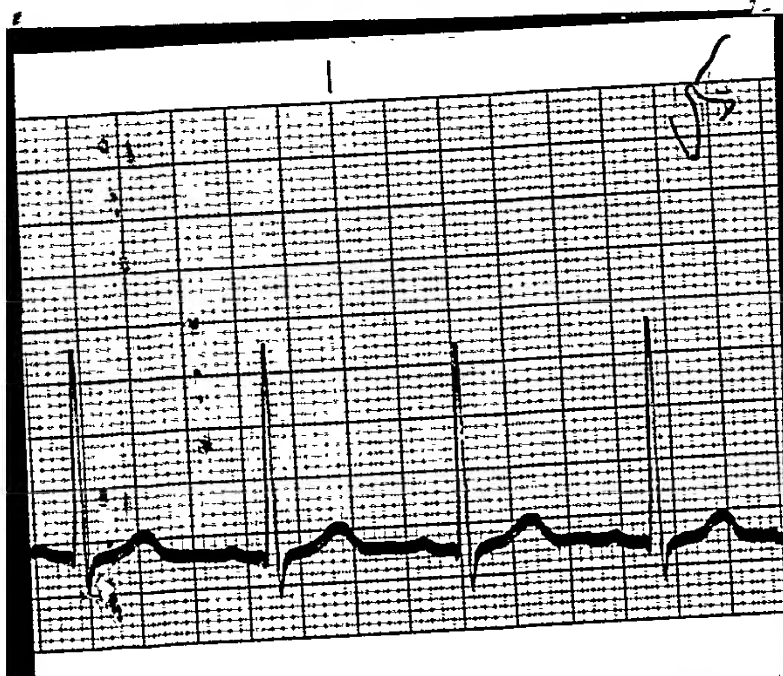
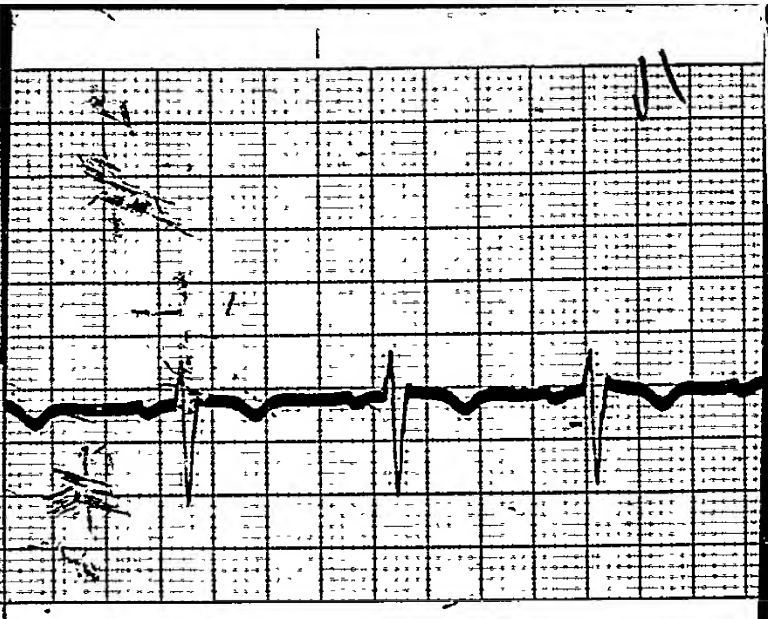
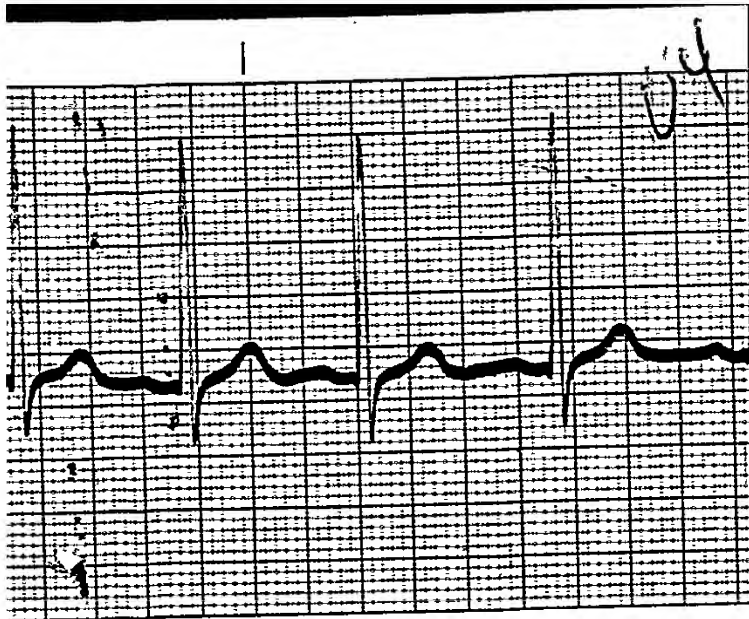
Normal

NO.		SIGNATURE		DATE	
ECG <i>55320</i>				<i>4-28-61</i>	
PATIENT'S IDENTIFICATION (For typed or middle; grade; date; hospital or medical facility)				REGISTER NO.	
GALE, James H				WARD NO. FBI	

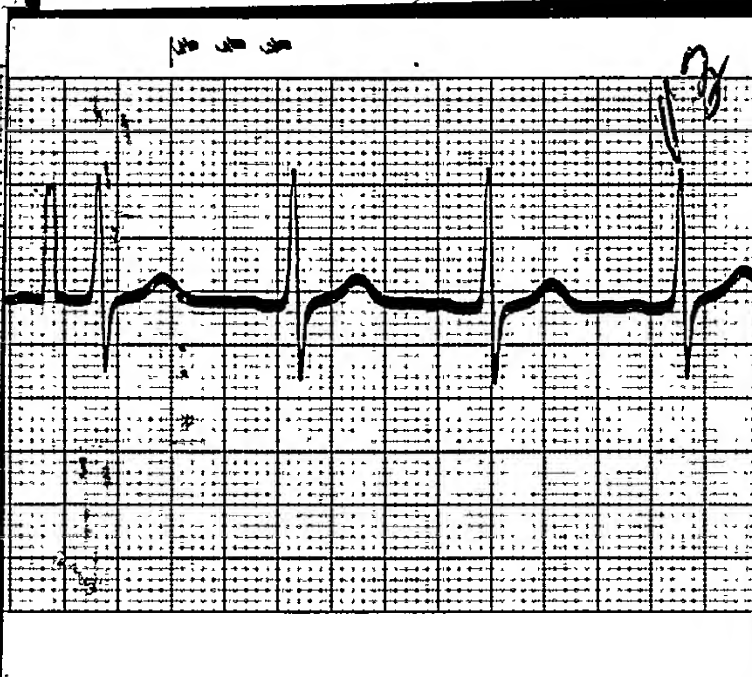
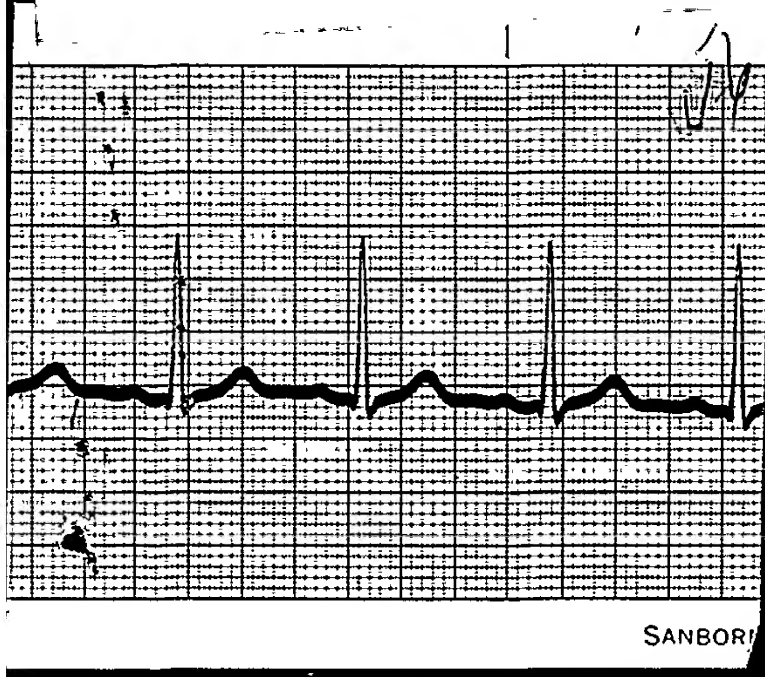
ELECTROCARDIOGRAPHIC RECORD
Standard Form 520







SANBORN VISO CARDIETTE



SANBORN

CLINICAL RECORD

Report on _____

or

Continuation of S. F. _____

(Strike out one line) (Specify type of examination or data)

(Sign and date)

(Continue on reverse side)

PATIENT'S IDENTIFICATION (For typed or written entries give: Name—last, first,
middle; grade; date; hospital or medical facility)

REGISTER NO.

WARD NO.

REPORT ON _____ or CONTINUATION OF _____

Standard Form 507
507

CLINICAL RECORD					ELECTROCARDIOGRAPHIC RECORD					PREVIOUS ECG	
CLINICAL IMPRESSION					MEDICATION					<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
										<input type="checkbox"/> EMERGENCY	<input type="checkbox"/> BEDSIDE
										<input checked="" type="checkbox"/> ROUTINE	<input checked="" type="checkbox"/> AMBULANT
AGE	SEX	RACE	HEIGHT	WEIGHT	S. P.	SIGNATURE OF WARD PHYSICIAN					DATE
42	M	Cauc.	74	177							12-13-63
RHYTHM					AXIS DEVIATION (QRS)					RATES	
Reg.					+ 30°					AURIC. VENT 68	
INTERVALS					P WAVES						
PR 0.16 QRS 0.08 QT 0.40					Reg.						
QRS COMPLEXES											
RS-T SEGMENT					WNL						
					T WAVES					WNL	
UNIPOLAR EXTREMITY LEADS (Specify)											

PRECORDIAL LEADS (Specify)

SUMMARY, SERIAL CHANGES, AND IMPLICATIONS:

Normal EKG

NO.	[Redacted Box]	(Continued on reverse)	
ECG		TITLE	DATE
PATIENT'S IDENTIFICATION			12-13-63
		REGISTER NO.	WARD NO.
		F F	

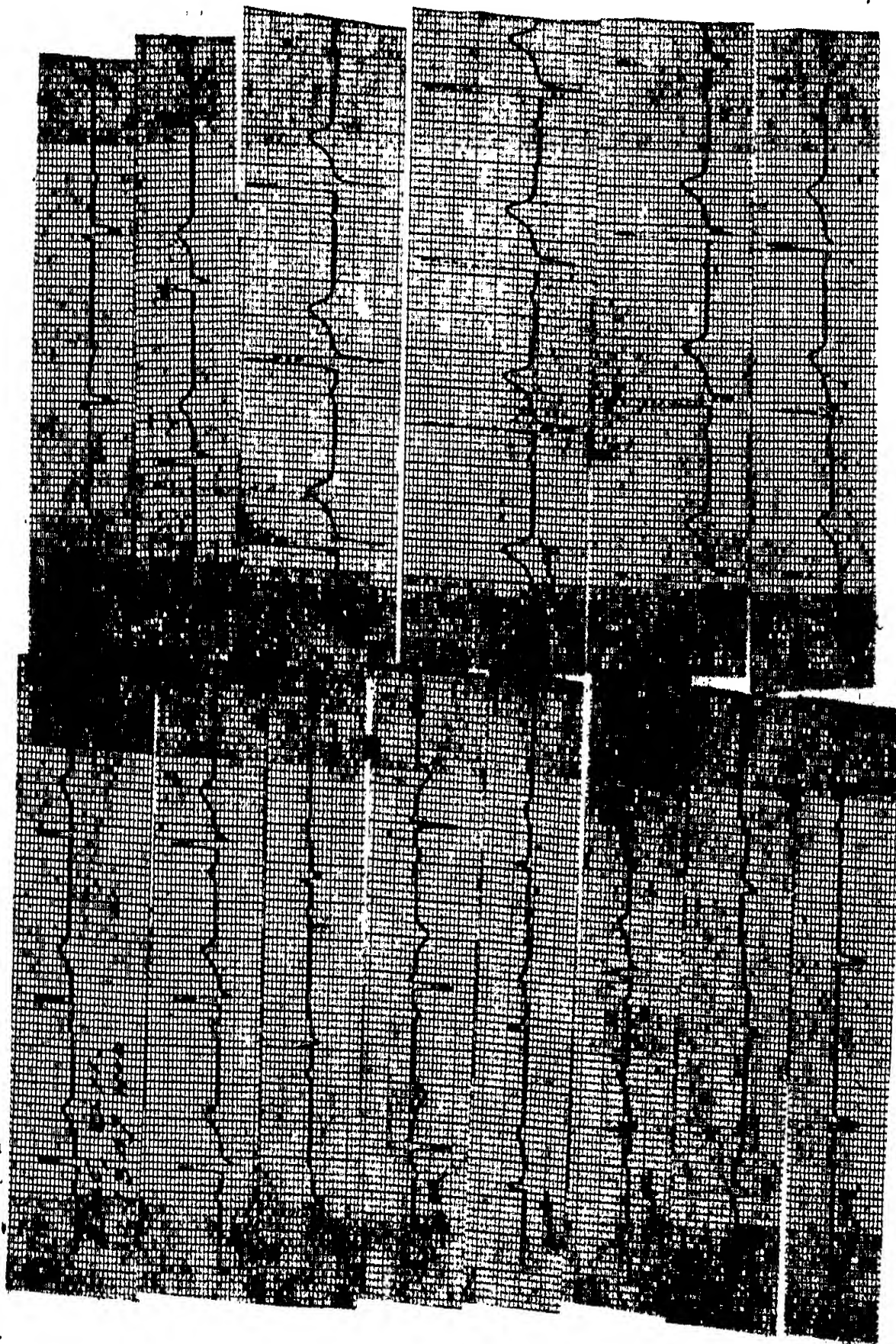
GALE, JAMES HENRY

ASSISTANT DIRECTOR, FBI

ELECTROCARDIOGRAPHIC RECORD
Standard Form 800
(Attach tracings to S. F. 800)

b6

NIC



name: GALE D.H.
CH

ELECTROCARDIOGRAPHIC RECORD

PATIENT Gale, James Henry
DATE 25 May 62 AGE 40 SEX Male CODE _____
DR. (S) _____

ADDRESS _____ TEL. NO. _____

OCCUPATION _____ PLACE OF TEST _____

ARMED FORCES EXAMINING STATION
615 W. VAN BUREN STREET
CHICAGO 7, ILLINOIS

PHYSICAL DATA
(HT., WT., B.P., ETC.) _____

MEDICATION

DIGITALIS

☐ YES ☐ NO

QUINIDINE

☐ YES ☐ NO

☐ YES ☐ NO

☐ YES ☐ NO

REMARKS _____

OTHER TEST OR _____

PATIENT DATA _____

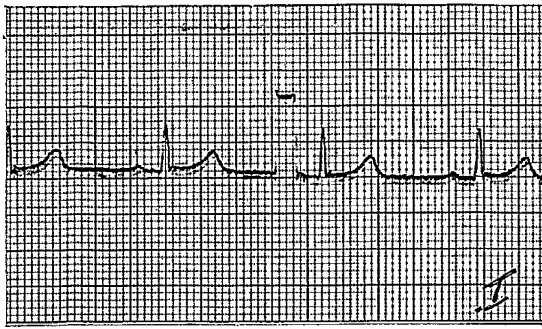
PATIENT

James H. Gale

b6

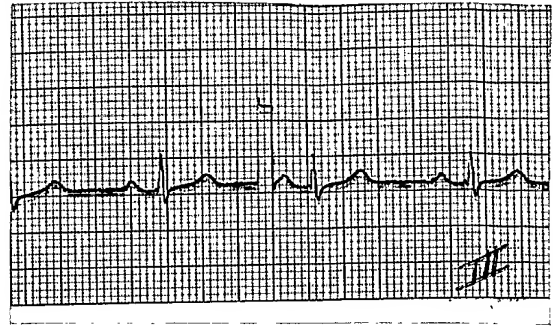
LIMB LEADS

1



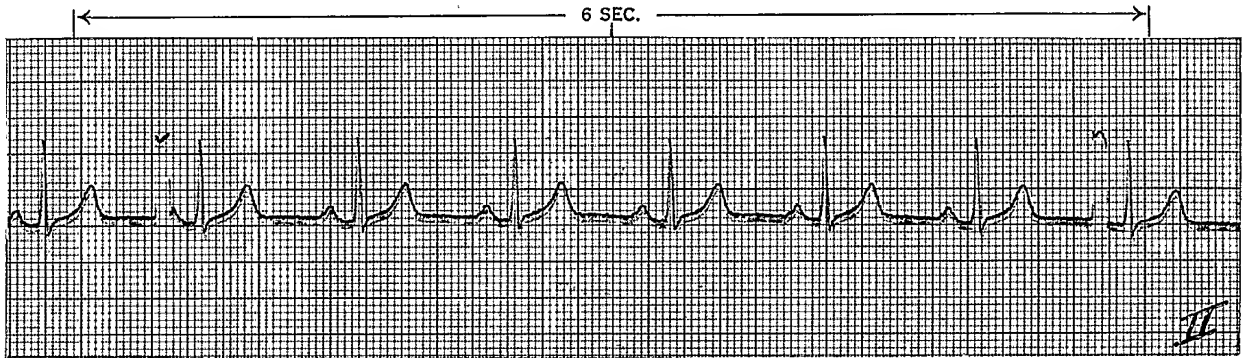
OBS. _____

3



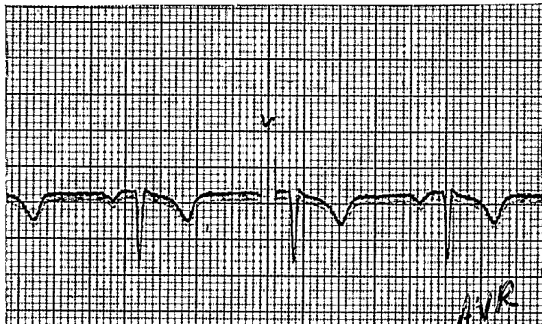
OBS. _____

2



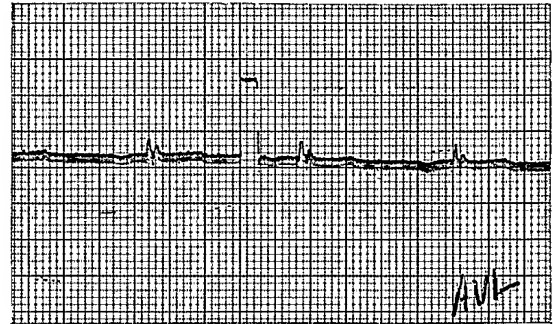
OBS. _____

AVR



OBS. _____

AVL



OBS. _____

AURIC. RATE _____ Q-R-S INT. _____

VENT. RATE _____ Q-T INT. _____

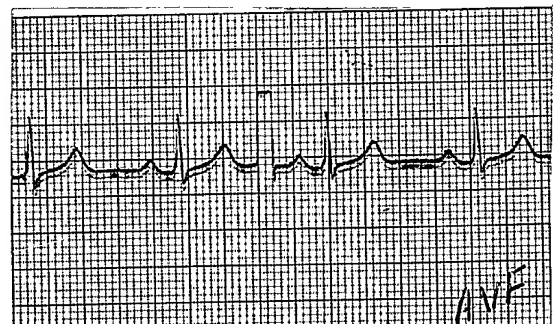
RHYTHM _____ S-T SEG. _____

P WAVES _____ T WAVES _____

P-R INT. _____ HEART POS. _____

OTHER & REMARKS: _____

AVF



OBS. _____

CLINICAL RECORD**ELECTROCARDIOGRAPHIC RECORD**

PREVIOUS ECG

☐ YES ☐ NO

CLINICAL IMPRESSION

MEDICATION

☐ EMERGENCY☐ BEDSIDE☐ ROUTINE☐ AMBULANT

AGE

SEX

RACE

HEIGHT

WEIGHT

B. P.

SIGNATURE OF WARD PHYSICIAN

DATE

40 M Cau 74" 176 25, MAY 62

RHYTHM

AXIS DEVIATION (QRS)

RATES

AURIC.

VENT.

INTERVALS

P WAVES

PR

QRS

QT

QRS COMPLEXES

RS-T SEGMENT

T WAVES

UNIPOLAR EXTREMITY LEADS (Specify)

PRECORDIAL LEADS (Specify)

SUMMARY, SERIAL CHANGES, AND IMPLICATIONS:

(Continue on reverse)

NO. ECG	SIGNATURE	TITLE	DATE
------------	-----------	-------	------

PATIENT'S IDENTIFICATION (For typed or written entries give: Name—last, first, middle; grade; date; hospital or medical facility)

REGISTER NO.

WARD NO.

GALE, JAMES HENRY, FBI, 25 May 62, AFES, Chicago

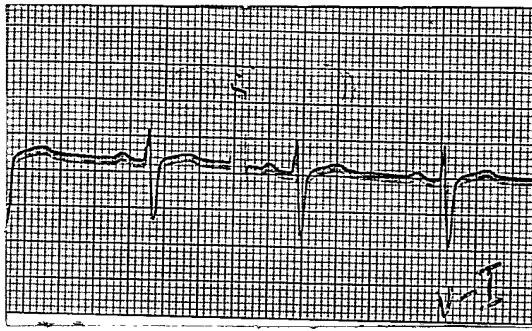
ELECTROCARDIOGRAPHIC RECORD

Standard Form 520

(Attach tracings to S. F. 507)

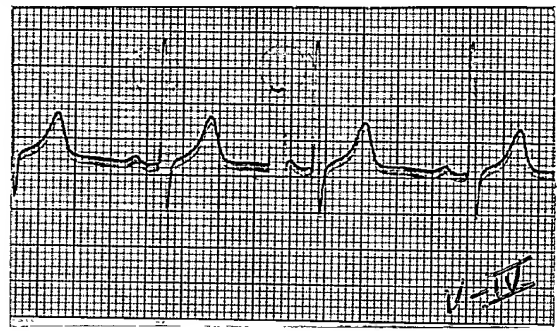
CHEST LEADS

V₁
CF₁
CR₁
CL₁



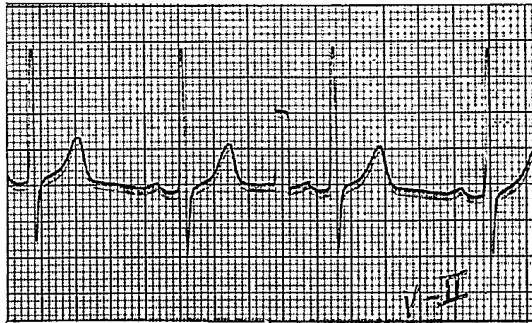
OBS. _____

V₄
CF₄
CR₄
CL₄



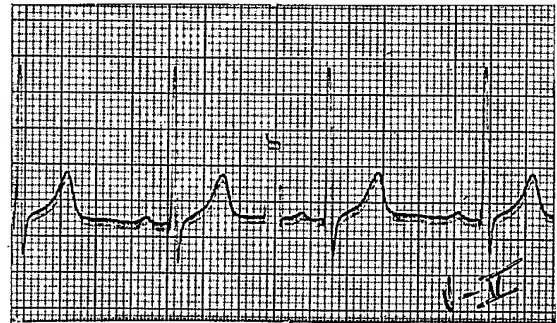
OBS. _____

V₂
CF₂
CR₂
CL₂



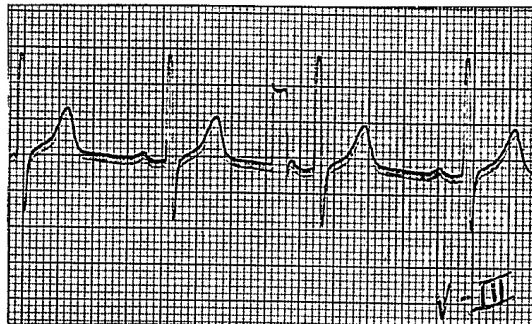
OBS. _____

V₅
CF₅
CR₅
CL₅



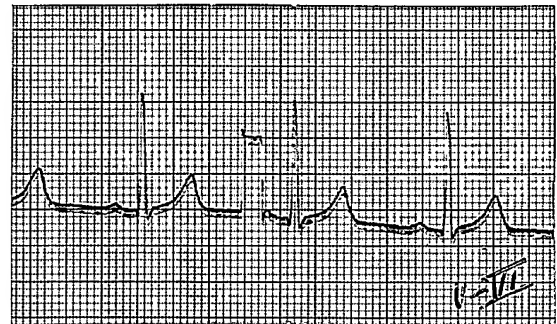
OBS. _____

V₃
CF₃
CR₃
CL₃



OBS. _____

V₆
CF₆
CR₆
CL₆



OBS. _____

ADDED AND/OR SPECIAL LEADS (ALSO STD. IF DESIRED)

OBS. _____

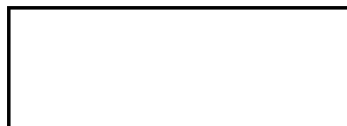
OBS. _____

OBS. _____

PREVIOUS ECG (S) _____
(AND/OR OTHER COMPARISONS) _____

CONCLUSIONS

Within Normal Limits



b6

CARDIOLOGY DEPT.
U.S.N.H. GLAKES ILL

M.D.

PREVIOUS E.C.G.

CLINICAL RECORD				ELECTROCARDIOGRAPHIC RECORD				PREVIOUS ECG	
CLINICAL IMPRESSION				MEDICATION				<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
								<input type="checkbox"/> EMERGENCY	<input type="checkbox"/> BEDSIDE
								<input checked="" type="checkbox"/> ROUTINE	<input checked="" type="checkbox"/> AMBULANT
AGE	SEX	RACE	HEIGHT	WEIGHT	B. P.	SIGNATURE OF WARD PHYSICIAN			
43	M	Cauc.	74	184					
RHYTHM				AXIS DEVIATION (QRS)				RATES	
INTERVALS				P WAVES				AURIC. VENT.	
PR				QRS				QT	
QRS COMPLEXES									
RS-T SEGMENT				T WAVES					
UNIPOLAR EXTREMITY LEADS (Specify)									

PRECORDIAL LEADS (Specify)

SUMMARY, SERIAL CHANGES, AND IMPLICATIONS:

NO SIGNIFICANT CHANGE SINCE 12/13/63

WITHIN NORMAL LIMITS

NO.
ECG

PATIENT'S IDENTIFICATION (For typed or written entries give: Name—last, first, middle; grade; date; hospital or medical facility)

GALE, JAMES HENRY

REGISTER NO.

F B I

DATE

7 DEC 1964

WARD NO.

STAFF CLINIC

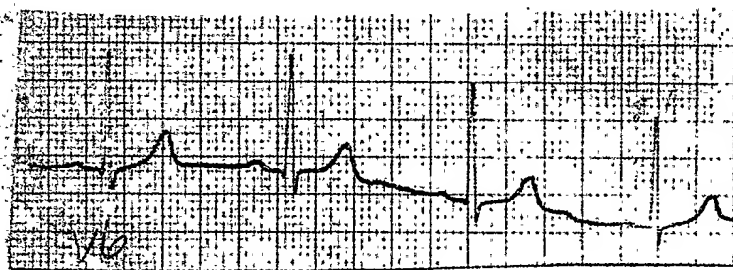
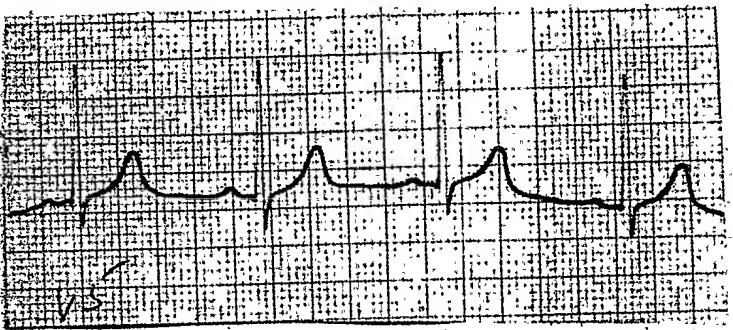
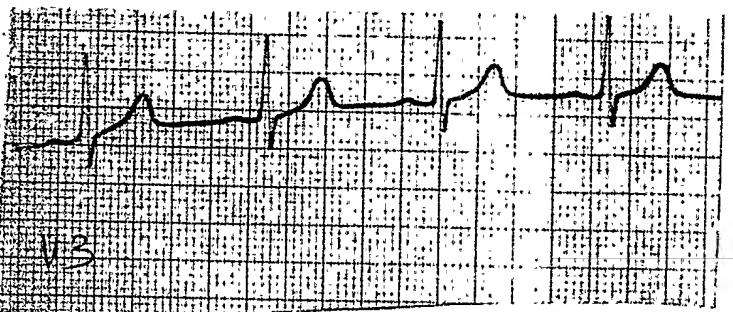
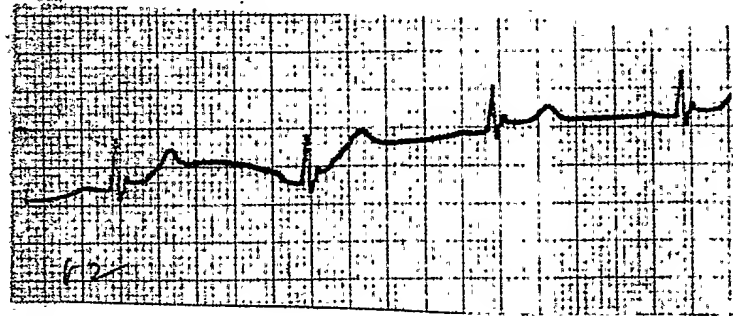
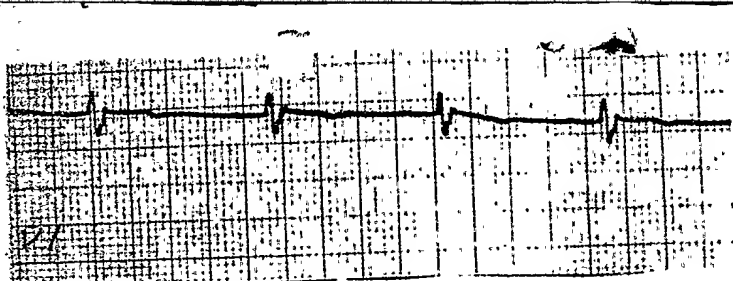
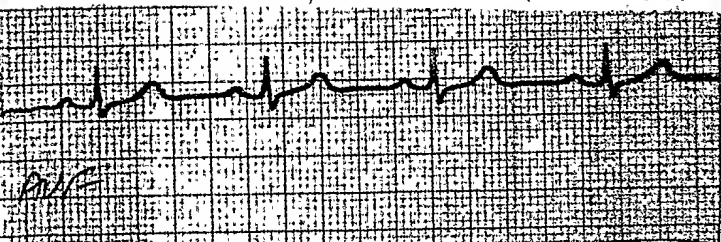
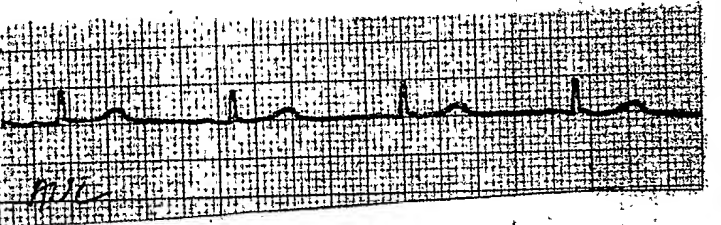
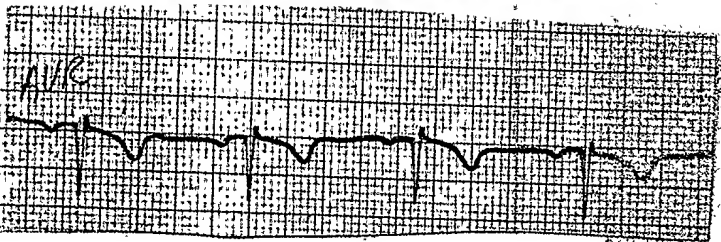
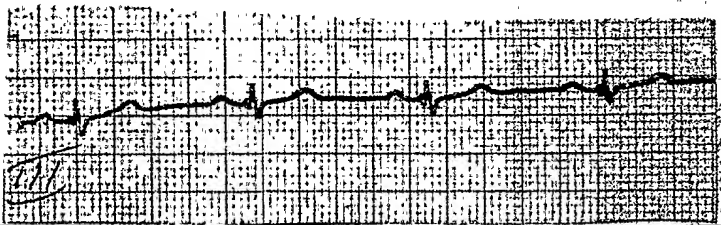
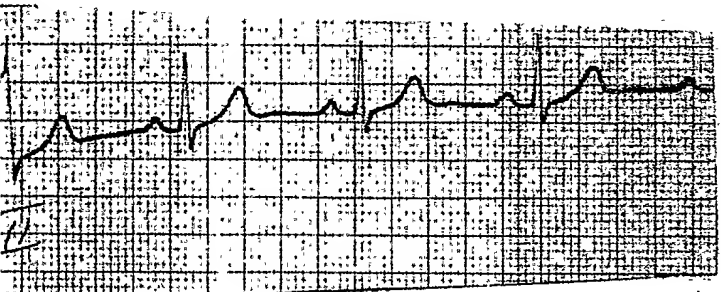
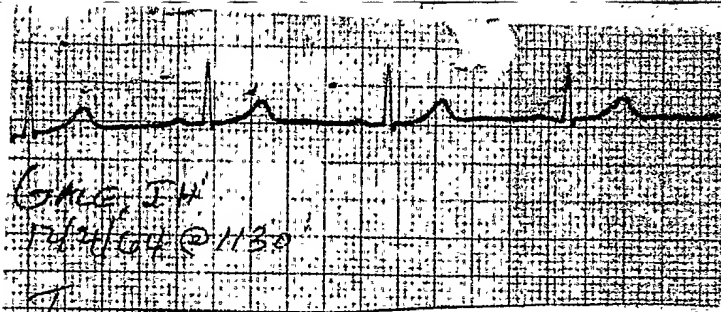
ELECTROCARDIOGRAPHIC RECORD

Standard Form 520

(Attach tracings to S. F. 507)

ASSISTANT DIRECTOR, F.B.I.

NNMC



CLINICAL RECORD						ELECTROCARDIOGRAPHIC RECORD		PREVIOUS ECG	
CLINICAL IMPRESSION						MEDICATION		<input type="checkbox"/> YES	<input type="checkbox"/> NO
								<input type="checkbox"/> EMERGENCY	<input type="checkbox"/> BEDSIDE
								<input type="checkbox"/> ROUTINE	<input type="checkbox"/> AMBULANT
AGE	SEX	RACE	HEIGHT	WEIGHT	B. P.	SIGNATURE OF WARD PHYSICIAN			DATE
41	M	C	6'2"	179					12/6/62
RHYTHM						AXIS DEVIATION (QRS)		RATES	
Normal Sinus Rhythm						+60		AURIC. 60 VENT. 60	
INTERVALS						P WAVES			
PR .20 QRS .08 QT .40						Normal			
QRS COMPLEXES									
Normal									
RS-T SEGMENT						T WAVES			
Normal						Normal			
UNIPOLAR EXTREMITY LEADS (Specify)									

PRECORDIAL LEADS (Specify)

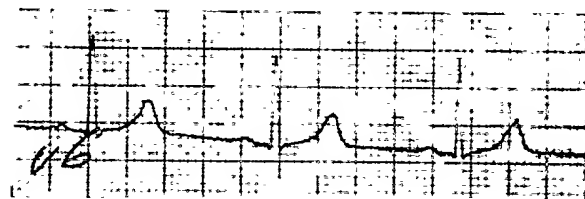
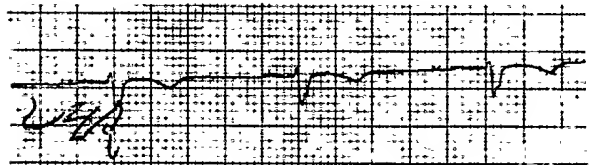
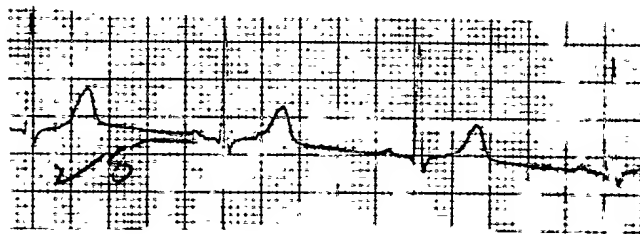
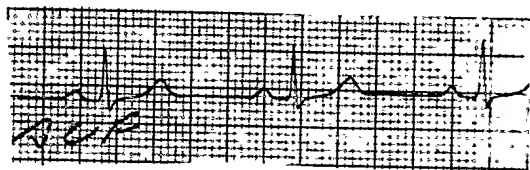
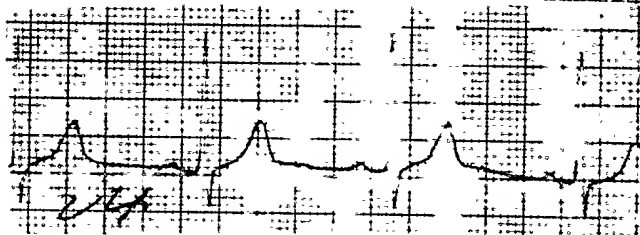
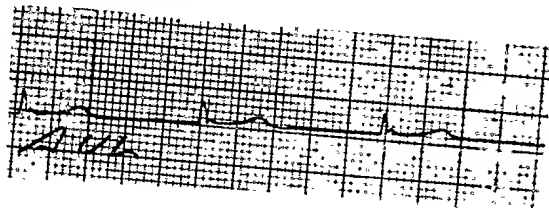
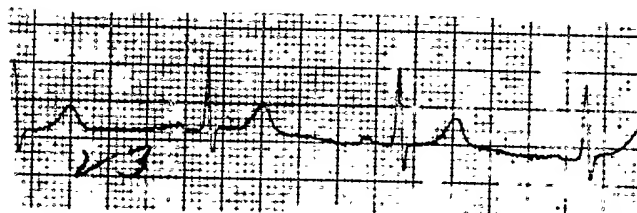
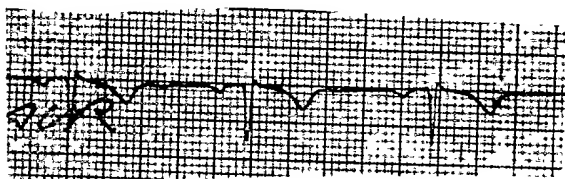
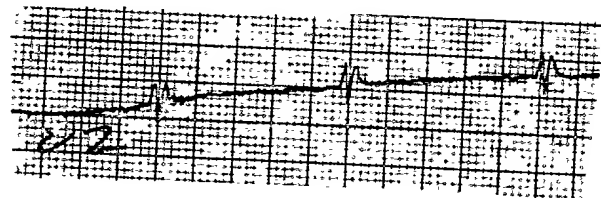
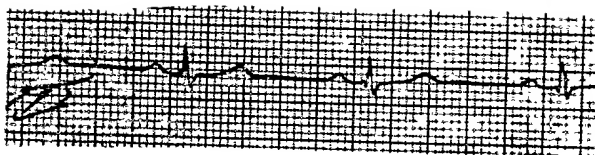
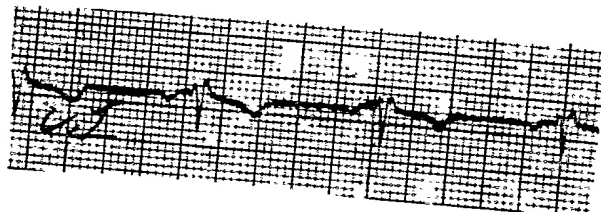
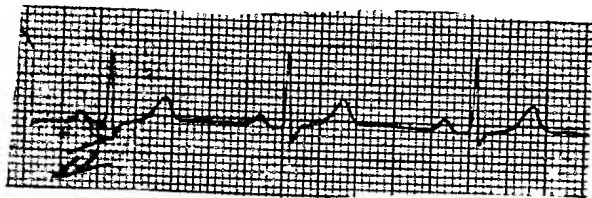
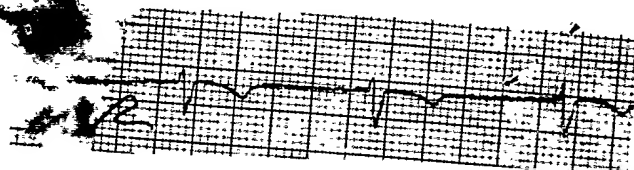
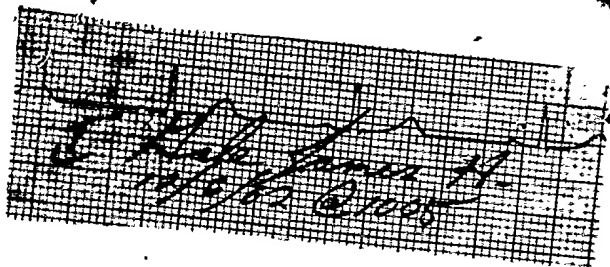
SUMMARY, SERIAL CHANGES, AND IMPLICATIONS:

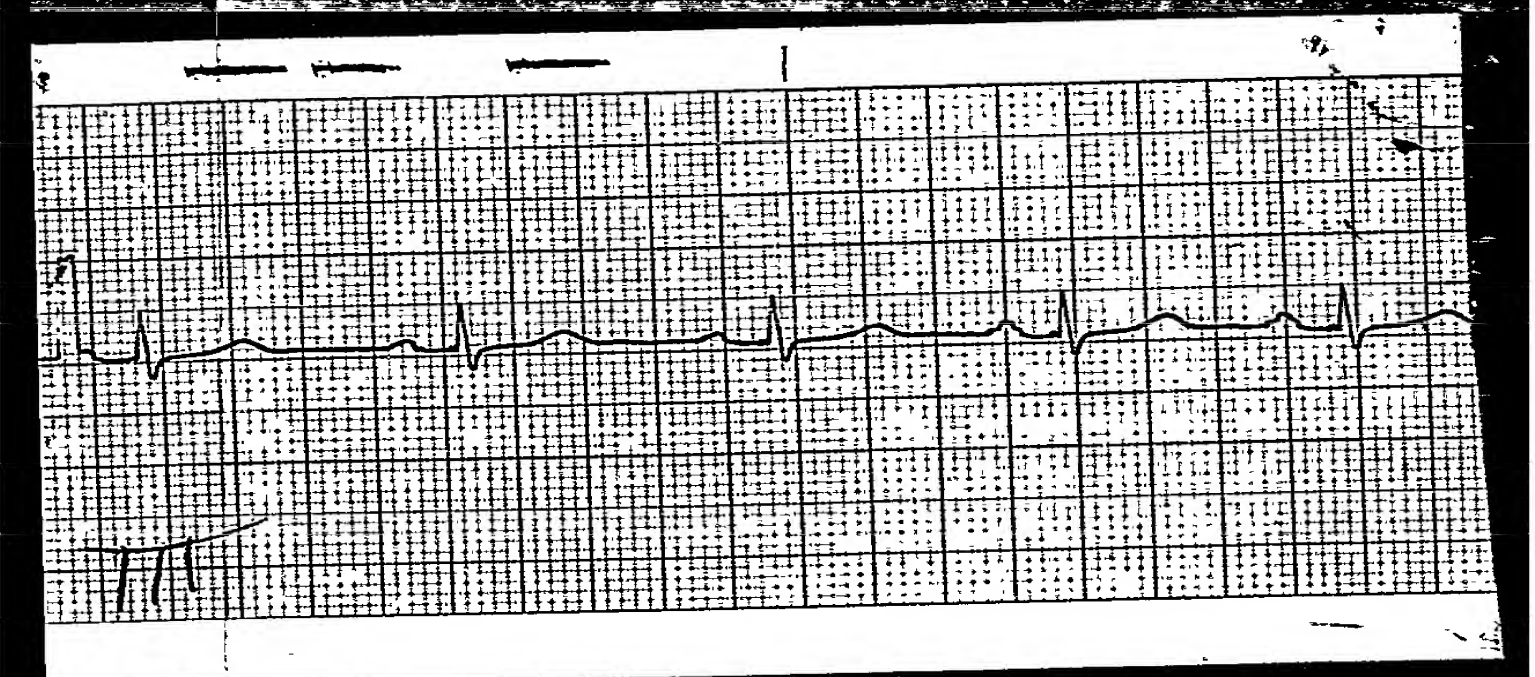
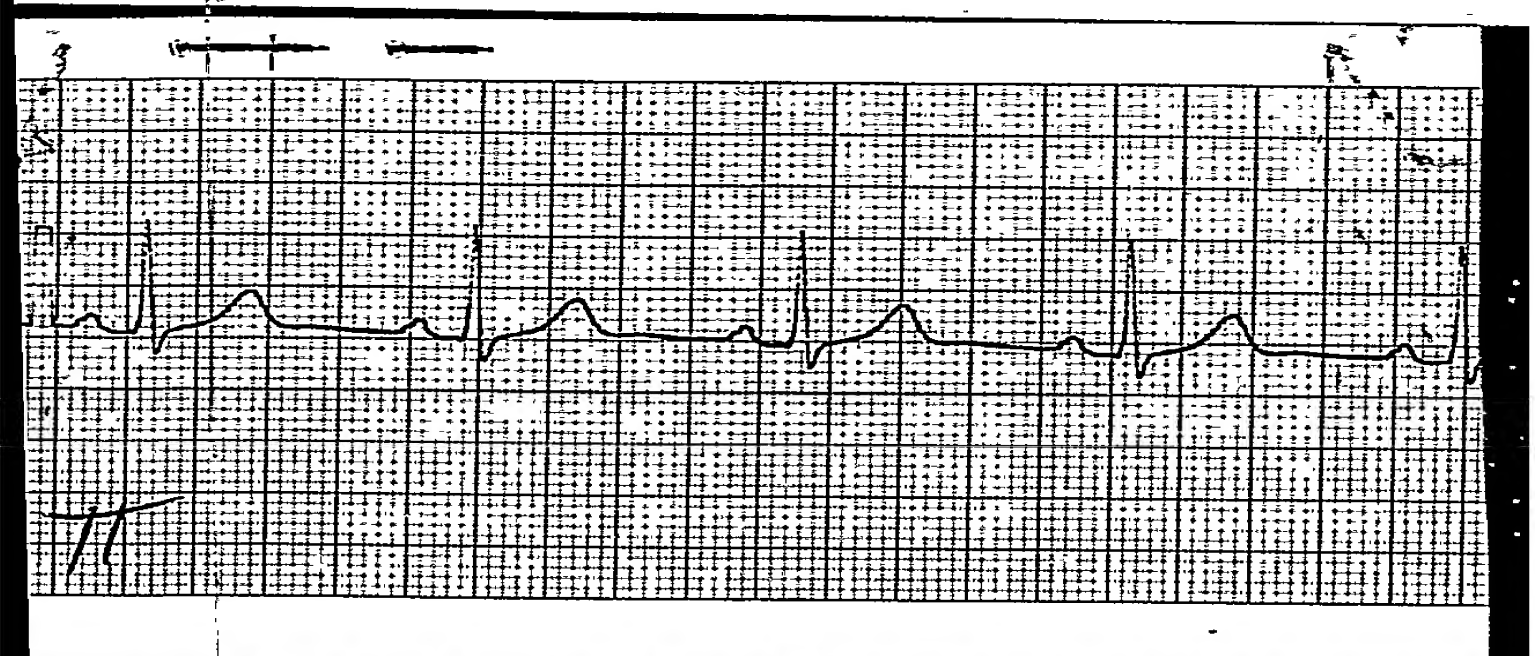
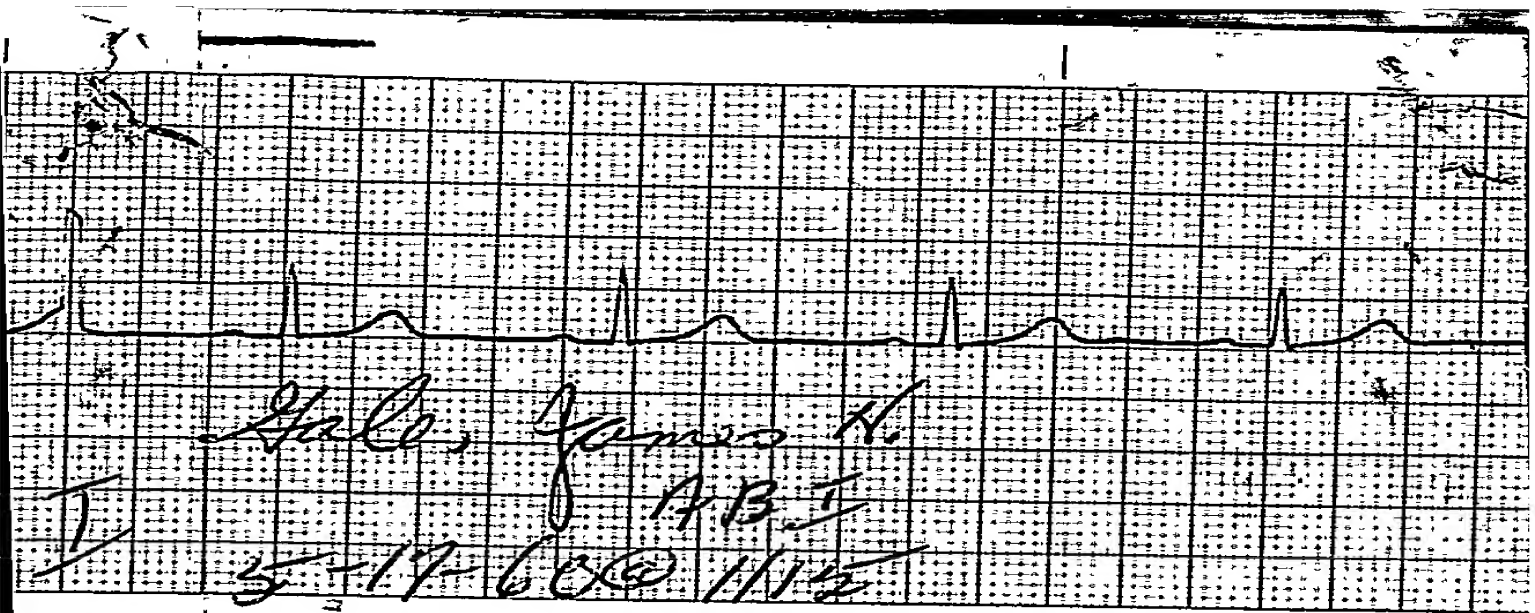
- 1) Within Normal Limits
- 2) No significant Change since 5/26.60

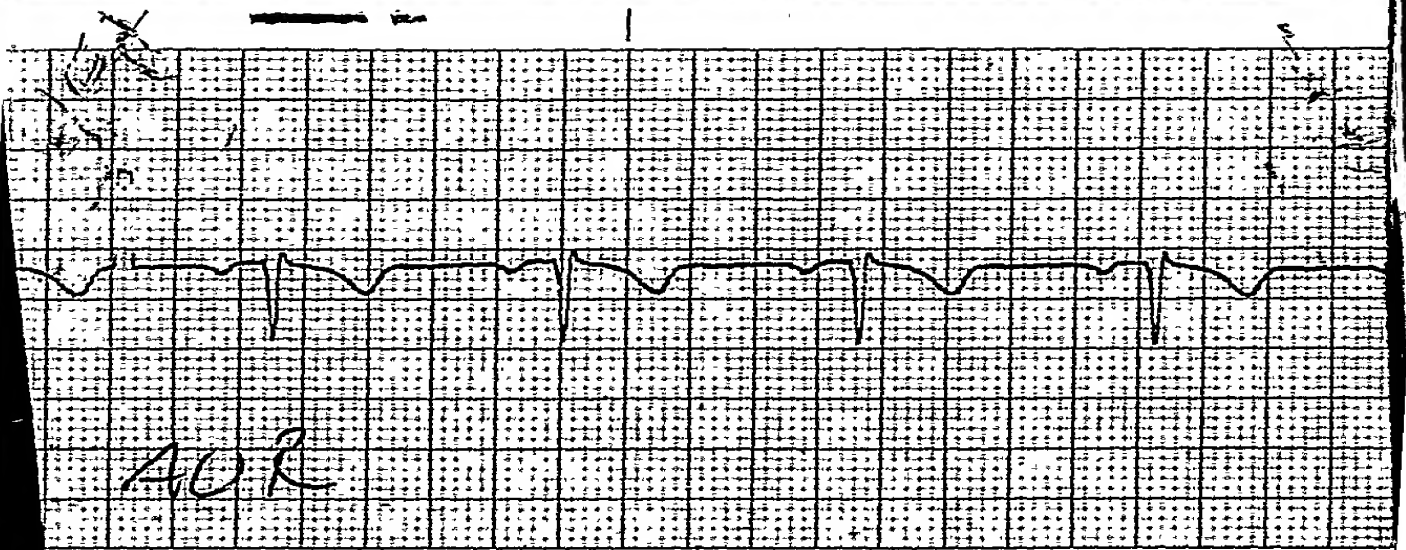
NO.	ECG	27429	[Redacted Box]		TITLE		Lt. USN MC	DATE	12/6/62
PATIENT'S IDENTIFICATION (For typed or written entries give: Name—last, first, middle; grade; date; hospital or medical facility)					REGISTER NO.		WARD NO.		
Gale James H FBI							SC		

ELECTROCARDIOGRAPHIC RECORD
Standard Form 520
520-10-1
(Attach tracings to S. F. 507)

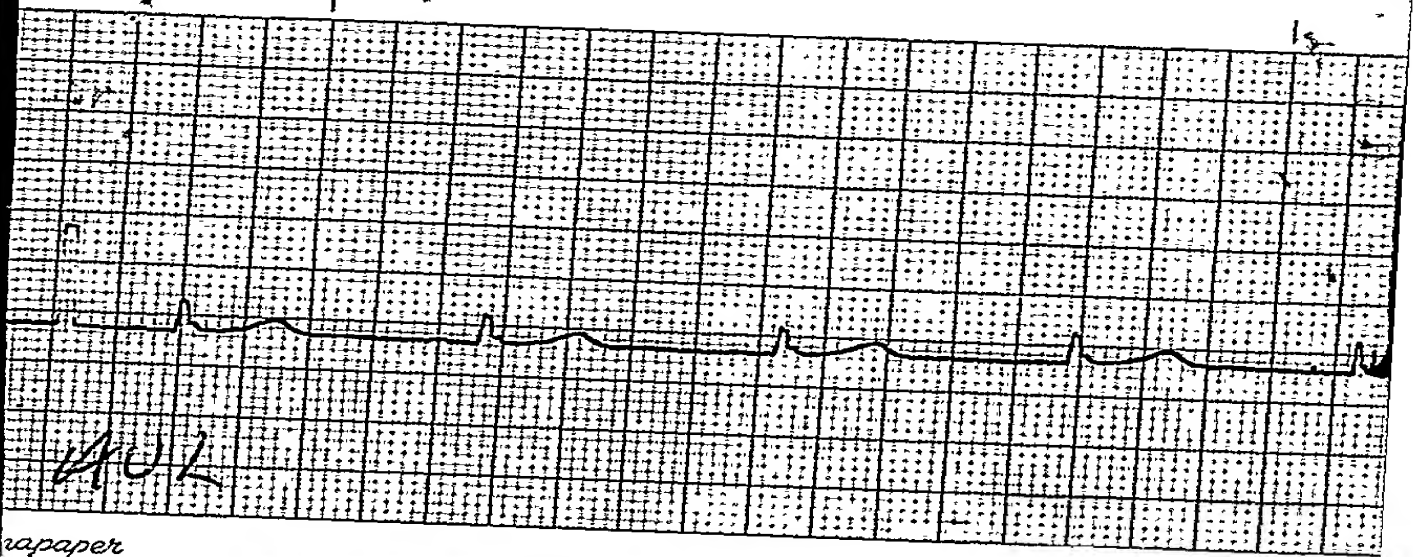
U.S. NAVAL HOSPITAL
CARDIOLOGY DEPT.
BETHESDA, MARYLAND



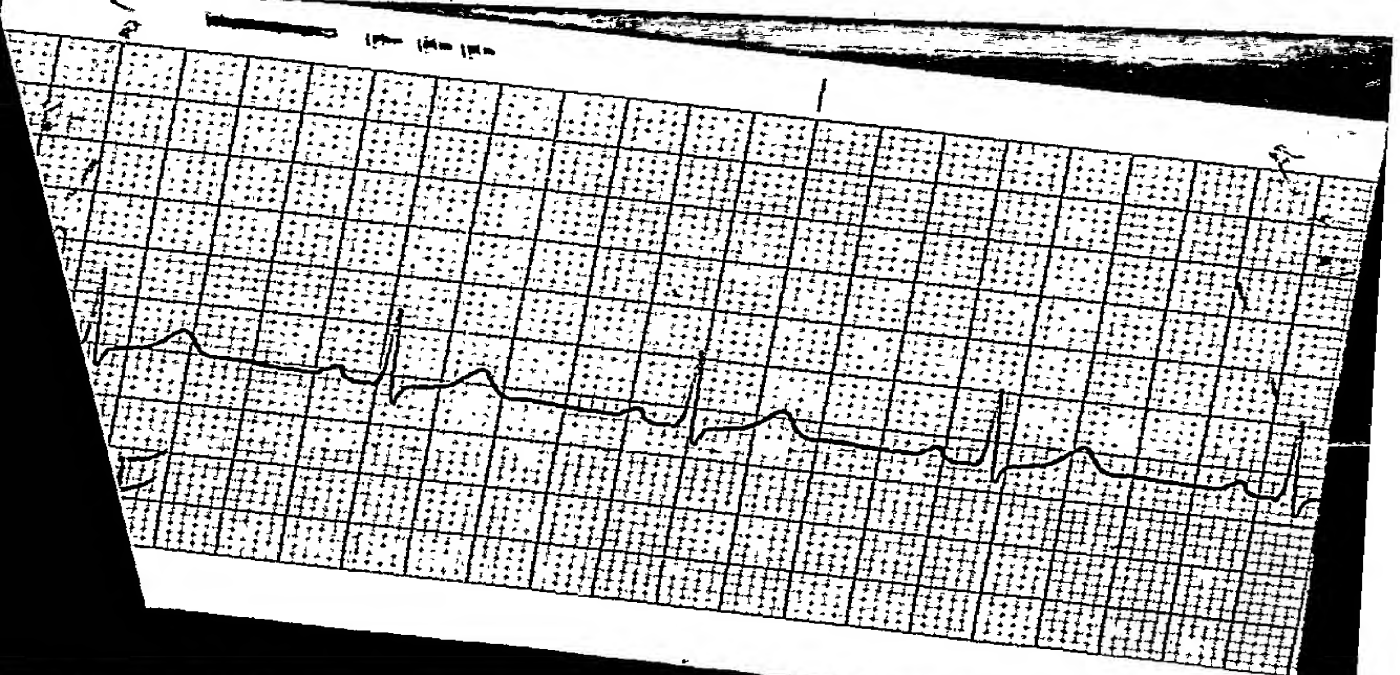


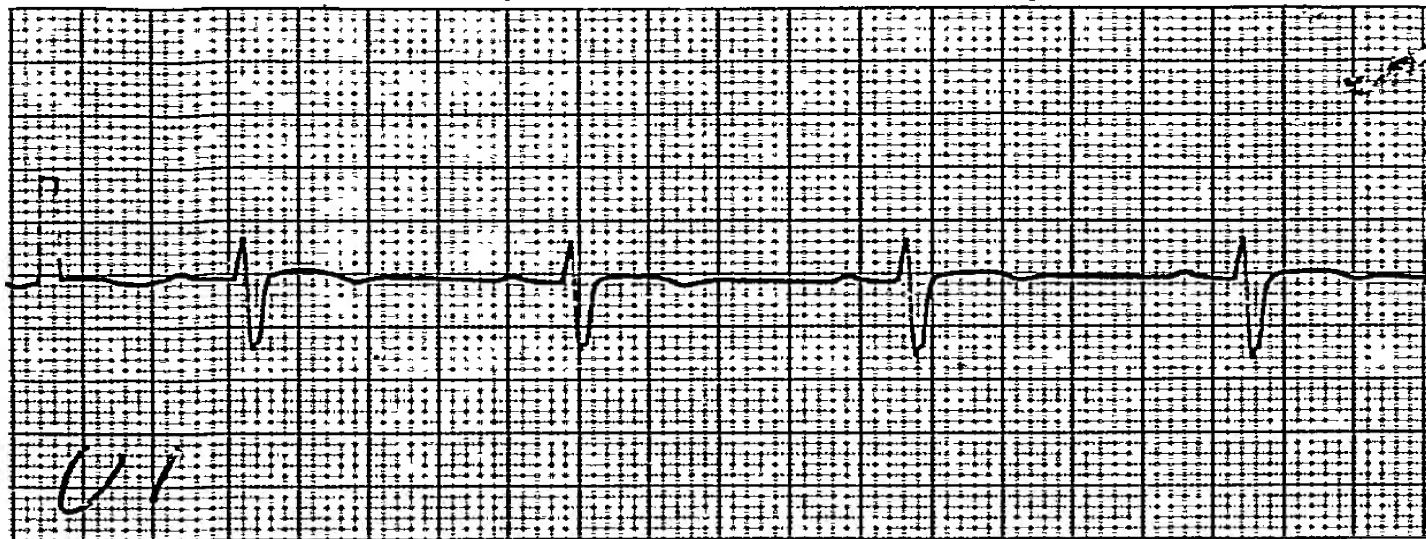


D-CARDIETTE Permapaper

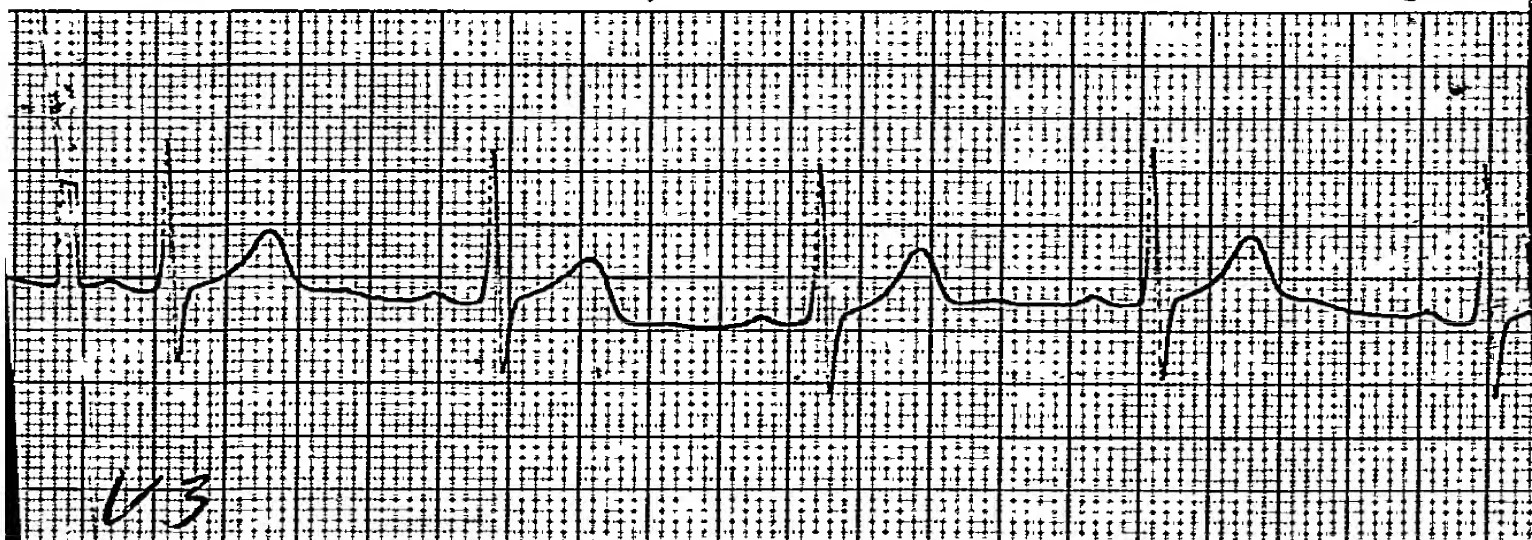
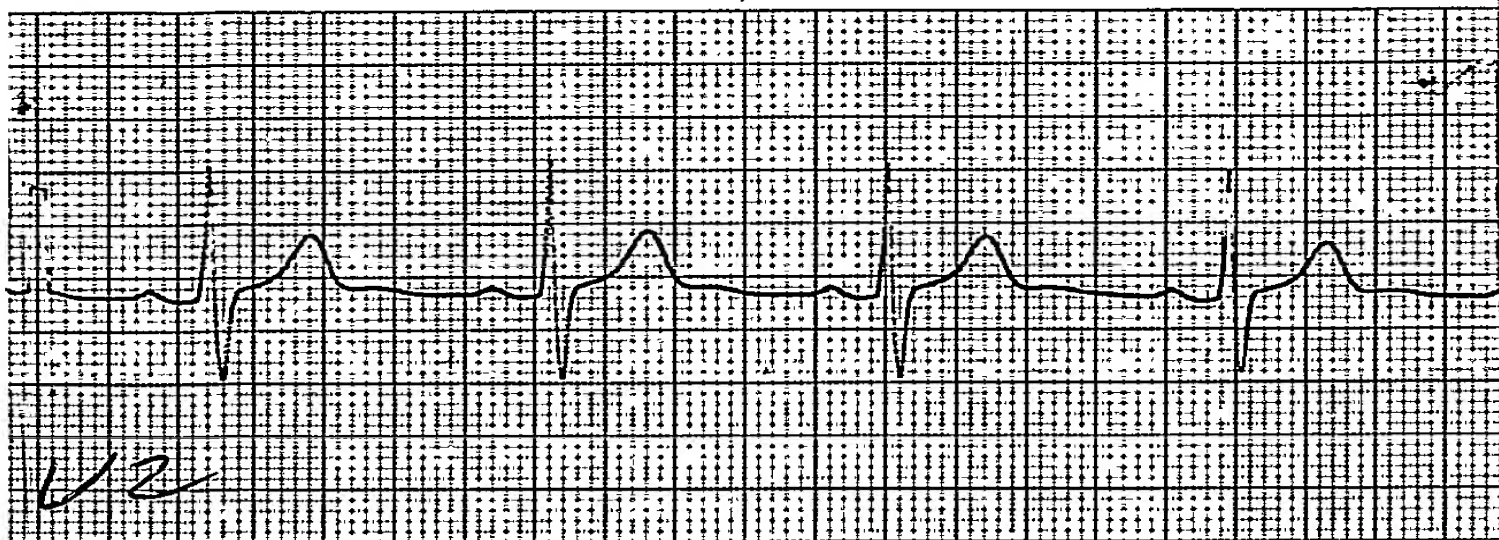


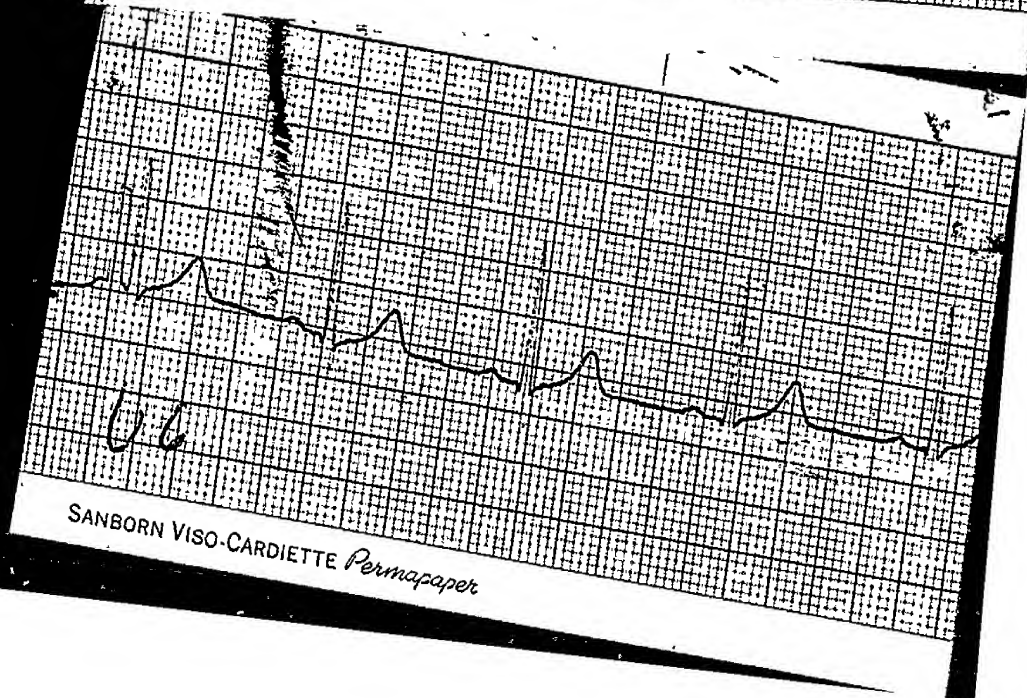
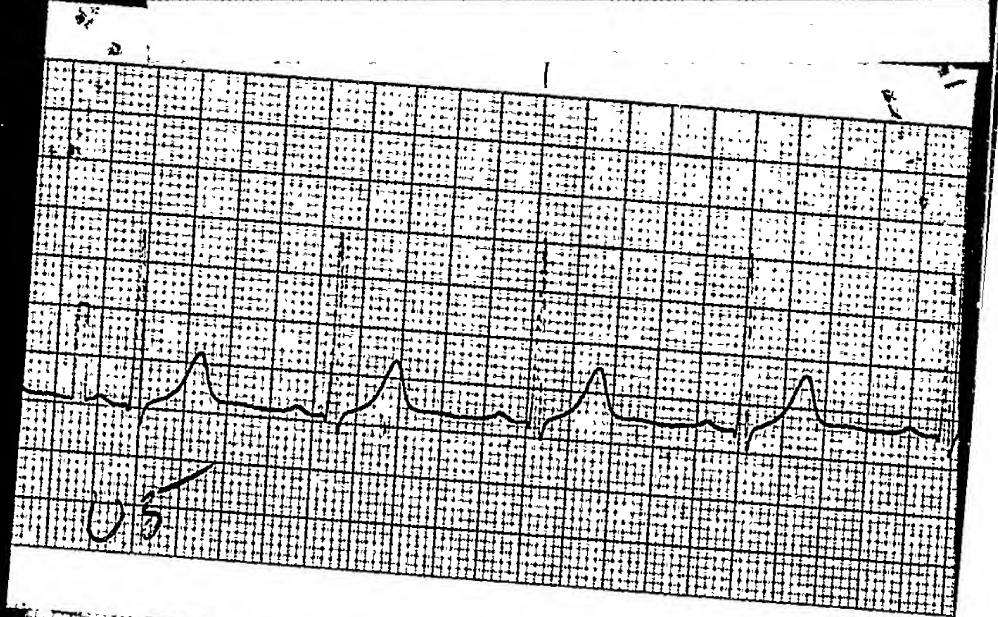
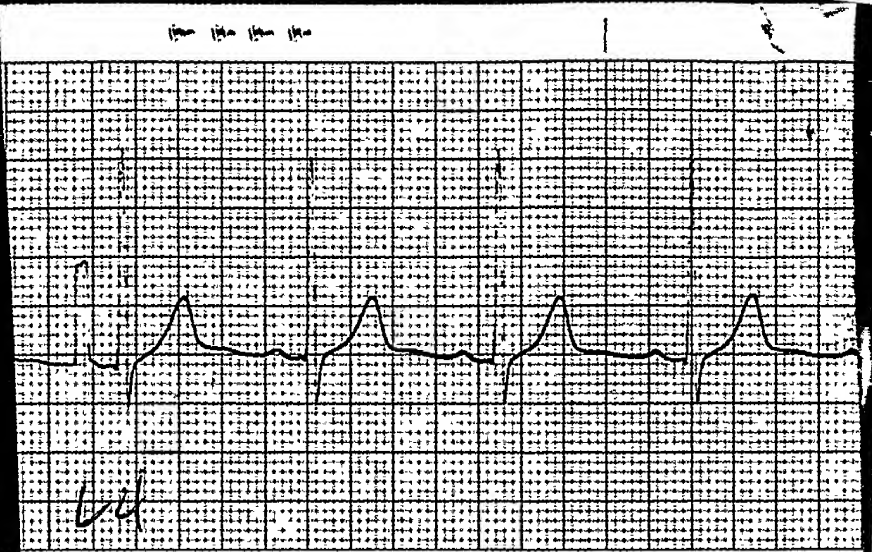
permapaper

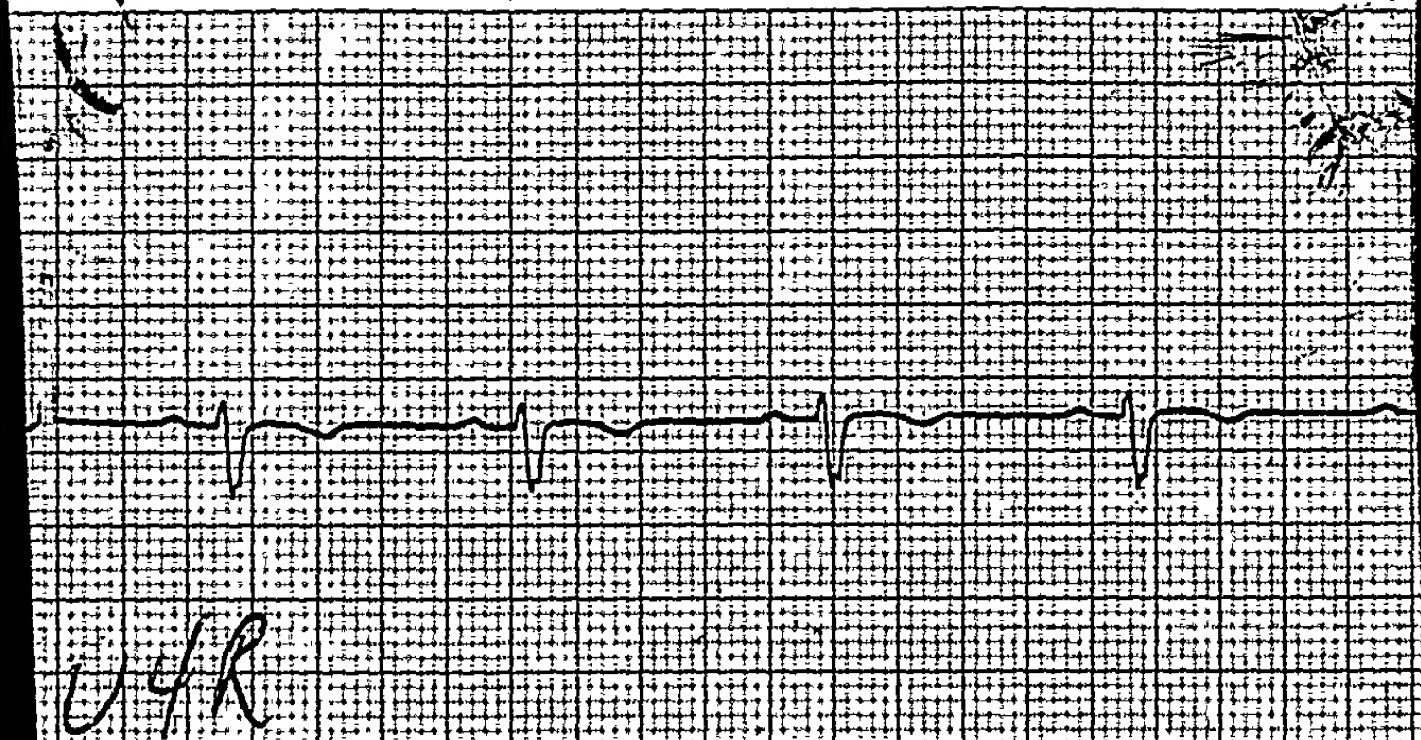




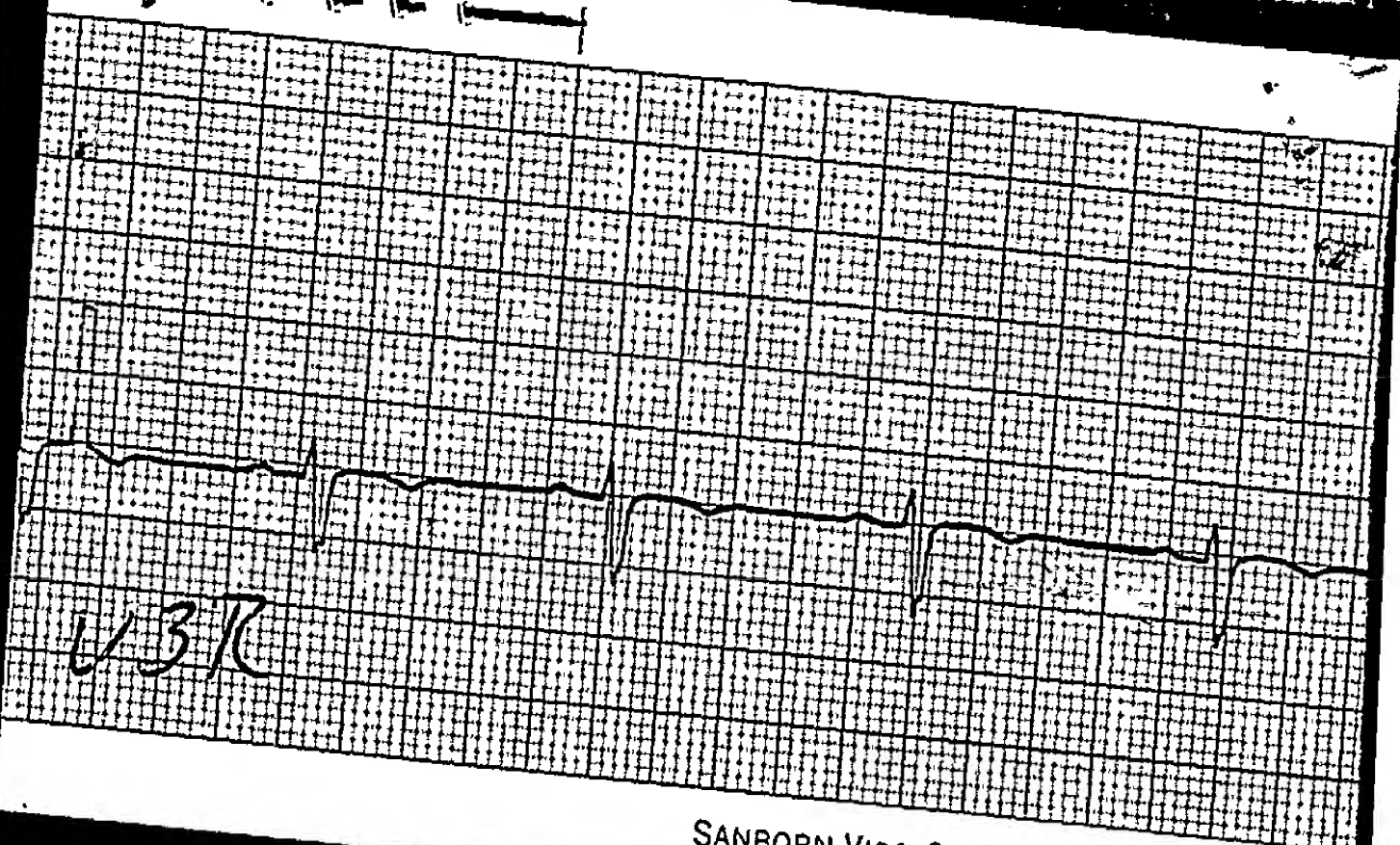
SANBORN VISO-CARDIETTE *Permapaper*







U4R



U3R

CLINICAL RECORD						ELECTROCARDIOGRAPHIC RECORD		PREVIOUS ECG	
CLINICAL IMPRESSION						MEDICATION		<input type="checkbox"/> YES <input type="checkbox"/> NO	
								<input type="checkbox"/> EMERGENCY <input type="checkbox"/> BEDSIDE <input type="checkbox"/> ROUTINE <input type="checkbox"/> AMBULANT	
AGE	SEX	RACE	HEIGHT	WEIGHT	B. P.	SIGNATURE OF WARD PHYSICIAN		DATE	
38	M	C	6/2	171				5-17-60/1115 ^{b6}	
RHYTHM						AXIS DEVIATION (QRS)		RATES	
Sinus						+ 45		AURIC. VENT. 70	
INTERVALS						P WAVES			
PR 0.16 QRS 0.08 QT						Normal			
QRS COMPLEXES									
RS-T SEGMENT						T WAVES			
UNIPOLAR EXTREMITY LEADS (Specify)									
PRECORDIAL LEADS (Specify)									

SUMMARY, SERIAL CHANGES, AND IMPLICATIONS:

1. Within Nomal Limits
2. No significant change since 6-29-59.

b6

(Continue on reverse)

NO.		TITLE	DATE
ECG 27429		LT MC USN	5-26-60
PATIENT'S IDENTIFICATION (For typed or written entries give: Name—last, first, middle; grade; date; hospital or medical facility)		REGISTER NO.	WARD NO.
			Staff Clinic

GALE, JAMES H. F.B.I.
U.S. Naval Hospital, National Naval Medical Center,
Bethesda 14, Maryland

ELECTROCARDIOGRAPHIC RECORD
Standard Form 520
(Attach tracings to S. F. 507)

CLINICAL RECORD				ELECTROCARDIOGRAPHIC RECORD				PREVIOUS ECG	
CLINICAL IMPRESSION <i>Routine EKG for FBI</i>				MEDICATION				<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
AGE	SEX	RACE	HEIGHT	WEIGHT	B. P.	SIG	PHYSICIAN		DATE
<i>45</i>	<i>M</i>	<i>Cauc</i>	<i>74"</i>	<i>183</i>	<i>124/80</i>				<i>12-15-66</i>
RHYTHM				VIATION (QRS)				RATES	
								AURIC. VENT.	
INTERVALS				P WAVES					
PR				QRS				QT	
QRS COMPLEXES									
RS-T SEGMENT				T WAVES					
UNIPOLAR EXTREMITY LEADS (Specify)									

PRECORDIAL LEADS (Specify)

SUMMARY, SERIAL CHANGES, AND IMPLICATIONS:

ECG within normal limits.

NO.	SIGNATURE	TITLE	DATE
ECG <i>871</i>	<i>COL MC</i>		<i>15 Dec 66</i>

PATIENT'S IDENTIFICATION (For typed or written entries give: Name—last, first, middle; grade; date; hospital or medical facility)

GALE, JAMES H.
ASSY DIRECTOR - FBI
WRGH,

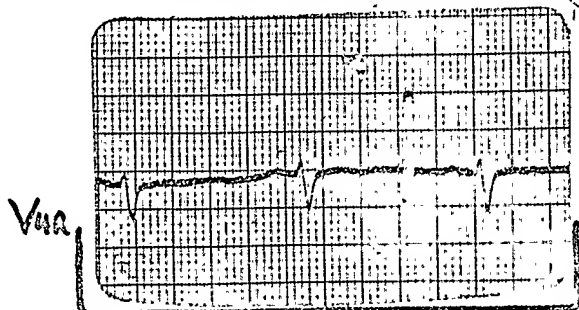
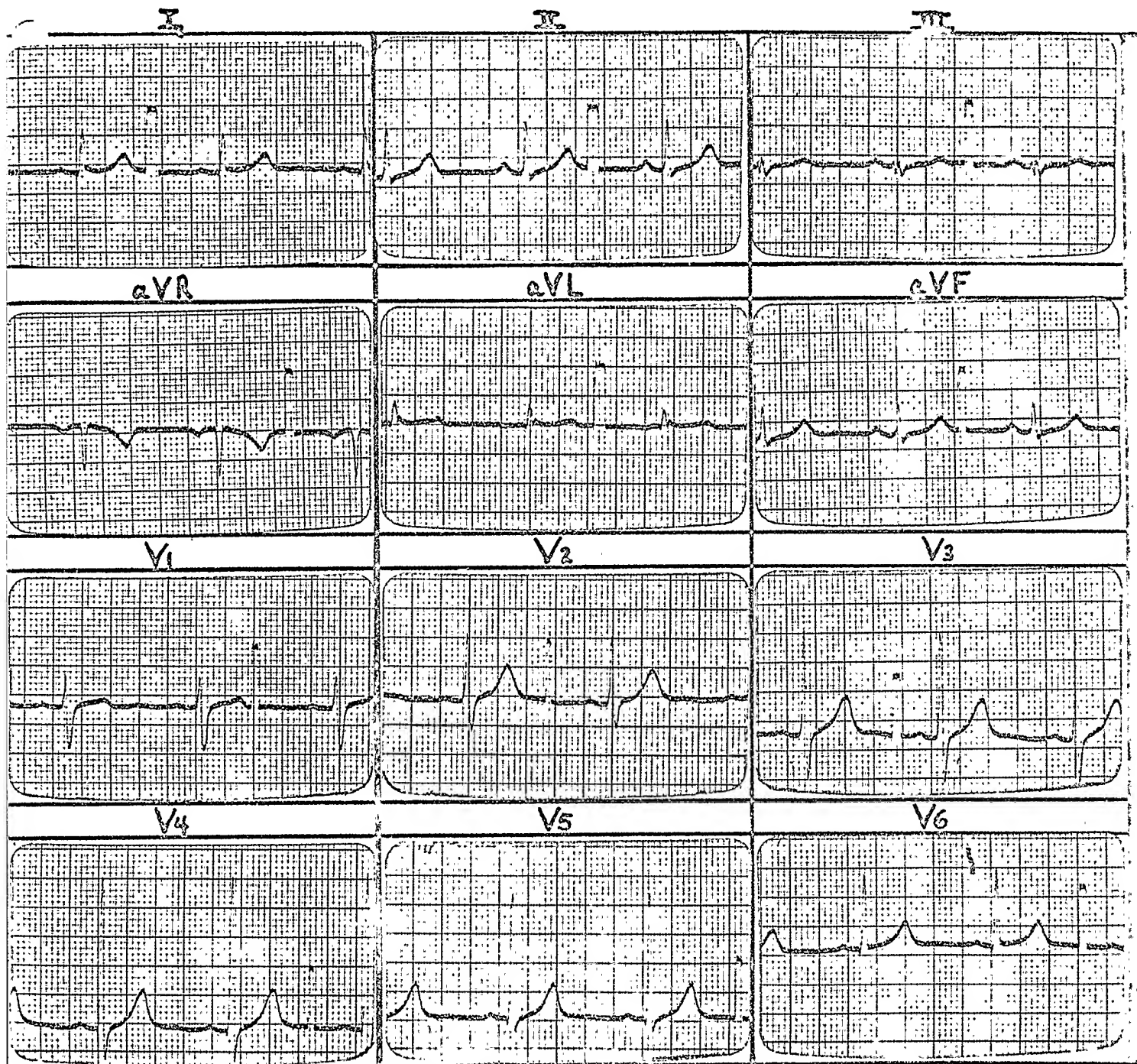
REGISTER NO. *FBI PHY. EXAM. SEC.* WARD NO.

ELECTROCARDIOGRAPHIC RECORD
Standard Form 520
520-104-02
(Attach tracings to S. F. 507)

GALE JAMES H.

ECG MOUNTING RECORD 15 DEC 61

g mh



copy - mc

May 12, 1949

Honorable Don C. Miller
United States Attorney
Cleveland 14, Ohio

My dear Mr. Miller:

I have received your letter of May 2, 1949, containing your comments relative to the two Special Agents you mentioned and I appreciate very much your interest in communicating with me. It is extremely gratifying to me to receive such comments concerning FBI employees from one who is in a position to evaluate their services.

Sincerely yours,

/s/ J. E. Hoover

cc-Cleveland, with copy of incoming

67-470-50
V

[Handwritten signature]
[Handwritten initials]

UNITED STATES DEPARTMENT OF JUSTICE

UNITED STATES ATTORNEY

Cleveland 14, Ohio

May 2, 1949

Mr. J. Edgar Hoover,
Director, Federal Bureau
of Investigation,
Department of Justice,
Washington 25, D. C.

Dear Mr. Hoover:

Lorenz H. Martin and James Gale, two members of your organization located in Cleveland, have demonstrated outstanding ability in the investigation of cases handled by our office, as well as being very cooperative when called upon by our office.

I felt you would be pleased to know that both of said men are held in the highest esteem by all of the men in my office.

Very truly yours,

Don C. Miller
United States Attorney

C
O
P
Y

67-442-7-

63
5-2

copy - mc

United States Department of Justice
UNITED STATES ATTORNEY
Cleveland 14, Ohio

October 18, 1949

Hon. J. Edgar Hoover,
Director,
Federal Bureau of Investigation,
Washington, D. C.

My dear Mr. Hoover:

We have just completed a case wherein a conviction was had of [redacted] for having in their possession Lucky Strike cigarettes and Half and Half smoking tobacco, which had been stolen from an interstate commerce shipment from the American Tobacco Company of Richmond, Virginia, to the American Tobacco Company at Rochester, New York.

b6

The case was built entirely by circumstantial evidence connected by isolated instances starting with June 25, 1948, to September 3, 1948.

Said case was assembled by Lorenz H. Martin and James H. Gale of the Cleveland office of the Bureau and in my experience as a practicing lawyer, I have never seen a more competent investigation or orderly set up of facts and wish you to know that we at this office are highly appreciative of their efforts and your ability to pick such capable men.

Respectfully,

/s/ Don C. Miller
Don C. Miller,
United States Attorney.

WCG:LK

100-4-54

FIELD FIREARMS TRAINING RECORD

SPECIAL AGENT

James H. Gale

FD-40
3-25-47

OFFICE	MO. YR.	HS	PPC	SG	.30	MG	GAS	RD	MAG	IN	QUALIFIED
Cleveland	8/47	E	91		77	93					
"	9/47	E	96	100		95			/		
"	10/47			100	79		✓				
"	11/47									✓	
"	12/47									✓	
"	1/48									✓	
"	2/48									✓	
"	3/48									✓	
"	4/48			100	73	85					
"	5/48	E	95		93						
"	6/48	E	90	100		85					
"	8/48	94	93			98					
"	9/48			100	87	90					
"	10/48	96	93	100		98					
"	10/48	100	93	100			Makeup				
"	11/48									✓	
"	12/48									✓	
"	1/49									✓	
"	2/49									✓	
"	3/49									✓	
"	5/49	80		100	82						
"	6/49	100	92			90					
St. Louis	7/49	92	94	100			✓			✓	PS
St. Louis	9/49					100			Makeup		✓
"	9/49	86	90			95		Makeup			

67-442-57

copy - mcr

OFFICE OF THE DIRECTOR

UNITED STATES DEPARTMENT OF JUSTICE

FEDERAL BUREAU OF INVESTIGATION

WASHINGTON 25, D. C.

October 26, 1950

Mr. R. J. Abbaticchio, Jr.
Federal Bureau of Investigation
United States Department of Justice
Cleveland, Ohio

Dear Mr. Abbaticchio:

I want to take this opportunity to commend you and the Special Agents of your Division for the excellent manner in which a White Slave Traffic Act matter involving [redacted] was handled. b6

The tact and diplomacy which were displayed in this instance are worthy of recognition. It is gratifying to know that employees of the Bureau stand ready to definitely clarify our policies and regulations in any circumstances and I am appreciative of the very fine work which was performed on this occasion by the Cleveland Office.

Sincerely,

/s/ J. Edgar Hoover

900 Standard Building
Cleveland 13, Ohio

August 30, 1951

Mr. J. C. Phillips, Manager
Veterans Administration Hospital
7300 York Road
Cleveland 29, Ohio

Dear Mr. Phillips:

It was very kind and thoughtful of you to write me on August 24th concerning the efforts of Special Agents James H. Gale and Boyd F. Burk, Jr. of this office in the matter involving the theft of property from your facility.

I have shown your commendatory letter to these men and both have informed me that were it not for the wholehearted assistance rendered by yourself, Mr. [REDACTED] of your Washington Headquarters it would have been extremely difficult to bring the case to a successful conclusion. b6

Again your help together with your good letter has been most appreciated, and should this office be in position to be of further service to you, please let me know.

Yours sincerely,

RJ
R. J. Abbaticchio Jr.
Special Agent in Charge

RJA:DG

RE ~~PERSONAL~~

PERSONAL

67/c Personnel Files - B BURK
J. GALE

67-442-76

FIELD FIREARMS TRAINING RECORD

SPECIAL AGENT

James H. Gale

FD-40
3-25-47

OFFICE	MO. YR.	pa HS	PPC	SG	.30	MG	GAS	RD	DT	map shoot	QUAL- IFIED
In - Serv. Trg	10/49	93	91		88	100					
Cleveland	11/49			Winter shoot							
"	12/49			Winter shoot							
"	1/50			Winter shoot							
"	2/50			Winter shoot							
"	3/50			Winter shoot							
"	5/50	90	94					✓	✓		✓
"	6/50	97	95	✓		88			✓		
"	6/50			100	87		Makeup				
"	8/50	93	96	✓		90					
"	9/50				84	92			✓		
"	10/50			Winter shoot							
"	10/50	97	98	100		Makeup					
"	11/50			Winter shoot							
"	12/50			Winter shoot							
"	1/51			Winter shoot							
"	2/51			Winter shoot							
"	3/51			Winter shoot							
"	5/51	90	97	100				✓	✓		
"	6/51	94	96	✓		90			✓		
"	8/51	100	95	100							
In Service	9/51	94	91	shoot	94	90			✓		
REMO	10/51								✓		
ANCHORAGE	11/51								✓		
	12/51								✓		

SEARCHED.....	INDEXED.....
SERIALIZED.....	FILED.....
MAY 7 1952	
FBI - ANCHORAGE	

James H. Gale

67-373-22

FD-107
(1-1-45)

DUPLICATE PROPERTY RECORD

(This record is to be kept up-to-date and should be maintained
in the field personnel file of the special agent.)

NAME GALE, JAMES H.

✓ Badge # 2622, with case #116 #33
✓ Commission Card with case, # 5449
✓ FBI Handbook # 1021
Tax Exemption Identification Card # _____
✓ Agents Brief Case X
✓ Zipper Brief Case X
G.T.R. Identification Card # _____

FIREARMS:

✓ Official Police Revolver # 708409
✓ Official Police Hip Holster X
✓ Grip Adapter X

INSPECTOR'S MANUAL #509
REMOVED

- Issued #177 *Suspect's Manual*

PERSONNEL
4/10/52

67 - NOT

DEC 23 1944

509

SEARCHED _____	INDEXED _____
SERIALIZED _____	FILED _____
APR 13 1955	
FBI — RICHMOND	

FIELD FIREARMS TRAINING RECORD

SPECIAL AGENT

Gale, James H.

FD-40
3-25-47

OFFICE	MO. YR.	HS	PPC	SG	.30	MG	GAS	RD	30 Round	S.G. #2 Skirt	QUALI- FIED
<i>Richmond</i>	<i>3/55</i>								✓		
"	<i>4/55</i>	<i>94</i>	<i>85</i>	<i>#1 100</i>		<i>94</i>					
"	<i>6/55</i>	<i>94</i>	<i>88</i>			<i>94</i>				✓	
"	<i>8/55</i>	<i>Absence of data</i>									
"	<i>10/55</i>	<i>98</i>	<i>95</i>	<i>#2 ✓</i>		<i>84</i>	<i>(make up)</i>				
"	<i>12/55</i>	<i>100</i>	<i>98</i>	<i>100</i>		<i>98</i>					
"	<i>2/56</i>								✓		
"	<i>3/56</i>								✓		
<i>Cincinnati</i>	<i>3/56</i>	<i>92</i>	<i>85</i>	<i>100</i>	✓	<i>90</i>				<i>D.T. + B.G.</i>	
	<i>4/56</i>	<i>98</i>	<i>99</i>	<i>24 ✓</i>		<i>94</i>		✓		<i>D.T.</i>	
	<i>7/56</i>	<i>100</i>	<i>99</i>	<i>24 ✓</i>		<i>94</i>		✓		<i>D.T.</i>	
		<i>98</i>	<i>92</i>	<i>100</i>		<i>92</i>		✓	<i>DT.</i>		<i>10/19/56</i>
									<i>26 ✓</i>		<i>MAR 20 1957</i>
									<i>276</i>		<i>MAR 20 1957</i>
									<i>288</i>		<i>20 1957</i>
		<i>98</i>	<i>98</i>	<i>100</i>	✓	<i>90</i>	<i>DT</i>	<i>B.G.</i>			<i>MAR 20 1957</i>
<i>Make up</i>		<i>94</i>	<i>92</i>	<i>Ex. used</i>		<i>94</i>					<i>MAR 23 1957</i>
		<i>98</i>	<i>93</i>	<i>used</i>		<i>88</i>					<i>MAR 23 1957</i>
<i>In Service 5</i>		<i>100</i>	<i>94</i>	<i>10</i>	<i>95</i>					<i>O.L.</i>	<i>Aug 19 1957</i>
		<i>96</i>	<i>96</i>	<i>100</i>		<i>94</i>	✓	<i>DT</i>	<i>278</i>	<i>2/58</i>	
<i>Make up</i>		<i>94</i>	<i>94</i>	<i>100</i>		<i>96</i>				<i>7/1</i>	
		<i>98</i>	<i>79</i>	<i>100</i>		<i>98</i>				<i>7/1</i>	
<i>PER</i>		<i>98</i>	<i>91</i>	<i>Did Not Shoot</i>		<i>92</i>				<i>9/17</i>	
<i>Make up</i>	<i>3/59</i>								<i>267</i>		
<i>Make up</i>	<i>1/60</i>								<i>264</i>		

*Copy sent to
JAN 1974*

Gale

FD-40
3-25-47

[illegible]

~~REMOVED FROM FILE~~

~~123456789~~

[illegible]

SEARCHED INDEXED
SERIALIZED FILED
JAN 12 1969
FBI - WASH. F. D.

COPIES DESTROYED
3-6-79

GALE JAMES H

294-01-8383

MONTH	TOT OT	AVG OT	OFF	AVG	DAYS WORKED
*JANUARY	42.08	2.06	2.14	D9	20
*FEBRUARY	39.31	2.12	2.13	D9	18
*MARCH	52.51	2.18	2.13	D9	23
*APRIL	48.06	2.11	2.13	D9	22
*MAY	46.11	2.19	2.15	D9	20
*JUNE	48.17	2.12	2.12	D9	22
*JULY	40.08	1.55	2.13	D9	21
*AUGUST	35.20	2.05	2.12	D9	17
*SEPTEMBER	18.52	2.06	2.14	D9	9

*NOT CERT.

TOTAL 1971	371.24	2.10			172
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File 3
DAS

NOT RECORDED
5 NOV 5 1971

REC-140

October 18, 1971

A. Maltby
Baker

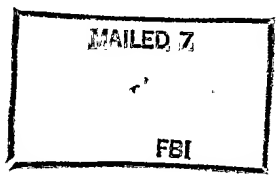
Mr. James H. Gale
3307 Rocky Mount Road
Fairfax, Virginia 22030

Dear Gale:

I have received your letter of October 12th,
with enclosure, and certainly understand your concern about
the false information which appeared in the Novak-Evans
column. It was thoughtful of you to write and I indeed appre-
ciate your staunch support. The sniping of malcontents who
use their fortuitous position with the media as ammunition to
attack those who do not march to their drum has unfortu-
nately become a common hazard of public office.

Sincerely,

J. Edgar Hoover



NOTE: Mr. Gale, former Assistant Director, EOD 11-29-39 as a clerk,
6-21-43 as a Special Agent and retired 10-1-71 is on the Special
Correspondents List.

- Olson _____
- Alt _____
- Wosen _____
- Chr _____
- Shop _____
- Miller, E.S. _____
- Callahan _____
- Sper _____
- Harad _____
- Libbey _____
- Cleveland _____
- Under _____
- Es _____
- Bel _____
- Waters _____
- Warr _____
- Tele. Room _____
- Nease _____
- Gandy _____

JJH:gar (3)

OCT 27 1971

MAIL ROOM ☐ TELETYPE UNIT ☐

HHG

MSR

7-27
TRE
Gar
JJH

March 8, 1973

Mr. James H. Gale
3307 Rocky Mount Road
Fairfax, Virginia 22030

Dear Mr. Gale:

It occurred to me that you may wish to have the enclosed copies of my prepared testimony before the Judiciary Committee of the United States Senate.

I send these to you because you devoted so many years of your life to making the FBI the institution that it is in our country.

With my best wishes and warm regards,

Sincerely,

L. Patrick Gray III

L. Patrick Gray, III
Acting Director

MAILED 5

MAR 8 1973

FBI

Enclosures (2)

LPG's Statement before Committee on the Judiciary, U. S. Senate,
Washington, D. C., 2-28-73.

LPG's Statement before Committee on the Judiciary, U. S. Senate,
Washington, D. C., 3-6-73.

NOTE: Mr. Gale is a former Assistant Director. Address per mailing list.

HRH:las (3)

Mr. Felt _____
Mr. Baker _____
Mr. Callahan _____
Mr. Cleveland _____
Mr. Conrad _____
Mr. Gebhardt _____
Mr. Jenkins _____
Mr. Marshall _____
Mr. Miller, E.S. _____
Mr. Soyars _____
Mr. Thompson _____
Mr. Walters _____
Tele. Room _____
Mr. Kinley _____
Mr. Armstrong _____
Mr. Bowers _____
Mr. Herington _____
Ms. Herwig _____
Mr. Mintz _____
Mrs. Neenan _____

MAIL ROOM ☒ TELETYPE UNIT ☐

NR03 AX CODE

5:17PM URGENT 6/19/72 DFS

TO ACTING DIRECTOR

MIAMI

WASHINGTON FIELD OFFICE

FROM ALEXANDRIA (139-18) (P) 4P

Mr. Felt	_____
Mr. Mohr	_____
Mr. Rosen	_____
Mr. Bates	_____
Mr. Bishop	_____
Mr. Callahan	_____
Mr. Campbell	_____
Mr. Casper	_____
Mr. Cleveland	_____
Mr. Conrad	_____
Mr. Dalbey	_____
Mr. Marshall	_____
Mr. Miller, E.S.	_____
Mr. Ponder	_____
Mr. Soyars	_____
Mr. Walters	_____
Tele. Room	_____
Mr. Kinley	_____
Mr. Armstrong	_____
Ms. Herwig	_____
Mrs. Neenan	_____

b6

WATERGATE

APARTMENTS, WASHINGTON, D.C., INTERCEPTION OF COMMUNICATION,
MIDEM - MIREP, JUNE SEVENTEEN, LAST. OO:WFO.

RE WFO TELCALL TO ALEXANDRIA JUNE NINETEEN, INSTANT.

REFERENCED TELEPHONE CALL REQUESTED INTERVIEW OF JAMES H. GALE, THREE THREE ZERO SEVEN ROCKY MOUNT DRIVE, FAIRFAX, VIRGINIA, ALLEGEDLY INVOLVED IN SOME TYPE SECURITY WORK WITH REPUBLICAN NATIONAL COMMITTEE, FOR ANY INFORMATION HE MIGHT HAVE REGARDING CAPTIONED SUBJECTS AND THEIR ENTRY INTO DEMOCRATIC NATIONAL HEADQUARTERS AT WATERGATE.

REC-18

GALE INTERVIEWED AT HIS HOME THIS DATE BY BUREAU AGENTS AND ADVISED HE HAD NO KNOWLEDGE OF CAPTIONED SUBJECTS, EITHER
END PAGE ONE

7 MAR 1 1973

PERS. REC. UNIT

6-55

PAGE TWO

UNDER TRUE NAMES OR ALIASES WHICH WERE READ TO HIM. HE ALSO SAID HE HAD NO KNOWLEDGE OF BREAK-IN AND ATTEMPTED BUGGING AT DEMOCRATIC HEADQUARTERS, OTHER THAN WHAT HE HAD READ IN NEWSPAPERS.

GALE ADVISED HE IS VOLUNTEER WORKER OF REPUBLICAN NATIONAL COMMITTEE AT PRESENT TIME AND WILL BEGIN FULL-TIME EMPLOYMENT WITH THIS GROUP JULY ONE, NEXT. HE SAID HE ORIGINALLY WAS SUPPOSED TO HANDLE SECURITY FOR REPUBLICAN NATIONAL COMMITTEE, BUT HAS TAKEN ON OTHER DUTIES IN "PROGRAMMING" FOR REPUBLICAN NATIONAL CONVENTION. HE SAID SECURITY DUTIES ARE NOW HANDLED BY THOMAS J. MC ANDREWS, AND HE OCCASIONALLY ASSISTS MC ANDREWS. GALE'S PROGRAMMING DUTIES CONSIST OF MAKING HOTEL RESERVATIONS AND HANDLING ADMINISTRATIVE DETAILS.

GALE SAID HE IS EXECUTIVE ASSISTANT TO RICHARD HERMAN, *Nob.* WHO IS VICE CHAIRMAN IN CHARGE OF ARRANGEMENTS, WHO IN TURN WORKS FOR ROBERT DOLE, CHAIRMAN OF THE REPUBLICAN NATIONAL COMMITTEE. *D.L.* HE SAID HERMAN IS CHAIRMAN OF BOARD OF HERMAN BROTHERS
END PAGE TWO

PAGE THREE

TRUCKING COMPANY IN NEBRASKA.. GALE SAID NEITHER HE NOR HIS ASSOCIATES HAVE BEEN INVOLVED IN ANY ELECTRONIC BUGGING, AND HE KNOWS OF NO ONE WHO HAS. HE SAID HE IS WELL AWARE THAT IT IS FEDERAL VIOLATION WITH STIFF PENALTIES. HE WAS ASKED IF HE EVER DISCUSSED BUGGING AND REPLIED "ELECTRONIC SWEEPS" OF REPUBLICAN OFFICES WERE DISCUSSED SOME TIME AGO AS PART OF SECURITY MEASURES, BUT TO HIS KNOWLEDGE NONE WERE EVER CONDUCTED, AND HE SAID HE IS NOT AWARE OF ANY INDIVIDUAL WHO COULD BE HIRED TO CONDUCT SUCH SWEEPS.

GALE FURTHER ADVISED HE HAS BEEN WORKING "ON THE ROAD" AND HAS NO OFFICE IN WASHINGTON, D.C. HE SAID THE ONLY REPUBLICAN OFFICE HE HAS USED IS NATIONAL REPUBLICAN COMMITTEE OFFICE AT SEASONS HOTEL, FIVE ZERO ZERO FIVE COLLINS BOULEVARD, MIAMI, FLORIDA. HE SAID THOSE OFFICES WERE PREVIOUSLY LOCATED AT FOUNTAINBLEAU HOTEL IN MIAMI.

GALE ADVISED HE HAD READ ABOUT BREAK-IN AT DEMOCRATIC HEADQUARTERS IN WASHINGTON POST NEWSPAPER, AND HE WAS SHOWN JUNE NINETEEN, INSTANT, ISSUE OF THE WASHINGTON POST WHICH CARRIED

END PAGE THREE

PAGE FOUR

PICTURES OF FOUR MEN INVOLVED. HE SAID HE DID NOT RECOGNIZE ANY OF THEM. HE SAID HE COULD OFFER NO SPECULATION AS TO WHAT THESE MEN WERE TRYING TO DO OR FOR WHOM THEY MIGHT BE WORKING. HE ALSO SAID HE DID NOT RECOGNIZE THE NAME OF THEIR ATTORNEY, [REDACTED], OR THE NAME EVERETT HOWARD HUNT, WHO MAY BE CONNECTED WITH THESE MEN.

b6

GALE STATED ONLY PERSON ON REPUBLICAN NATIONAL COMMITTEE WITH WHOM HE DISCUSSED THIS MATTER WAS ABOVE-MENTIONED RICHARD HERMAN, AND THIS DISCUSSION TOOK PLACE ON TELEPHONE ON MORNING OF JUNE NINETEEN, INSTANT. HERMAN TOLD HIM HE HAD NO KNOWLEDGE OF BREAK-IN, OTHER THAN WHAT HAD BEEN PRINTED IN NEWSPAPERS.

ADMINISTRATIVE:

FOR THE INFORMATION RECEIVING OFFICES, MR. GALE IS FORMER ASSISTANT DIRECTOR, AND THOMAS J. MC ANDREWS IS FORMER INSPECTOR, FBI.

END

PLS HOLD FOR ONE

KJB FBI WA DC

- 1 - Mr. Cleveland
- 1 - Mr. Emery
- 1 - Mr. McHale

The Attorney General

Acting Director, FBI

SEP 18 1972

COMMISSION ON THE REVIEW OF
NATIONAL POLICY TOWARD GAMBLING

Reference is made to the memorandum of Deputy Attorney General Ralph E. Erickson, dated September 7, 1972, forwarding a White House request for proposed names to be included among the Presidential appointees to captioned Commission.

Enclosed herewith are background forms listing nine former FBI Agents and executives whose experience would make them particularly suitable to membership on captioned Commission. They are:

[redacted] of Short Hills, New Jersey.

b6

Donald Kenneth Brown of Jacksonville, Florida.

Charles G. Cusick of Westlake, Ohio.

James Henry (Sale) of Fairfax, Virginia.

John Francis Kehoe, Jr., of Milton, Massachusetts.

Thomas Joseph McAndrews of Naples, Florida.

Edward Joseph Powers of Concord, New Hampshire.

Alex Rosen of Washington, D. C.

Joseph Aloysius Sullivan of New York, New York.

The biographical data set forth in the enclosed forms is the most current available in Bureau files.

Enclosures (9)

1 - The Deputy Attorney General

1 - Assistant Attorney General
Criminal Division

JEM:jca 5 SEP 18 1972
(18)

SEE PAGE 2.

DUPLICATE YELLOW

The Attorney General

b6

1 -
1 - 67-63536 (D.K. Brown)
1 - 67-414452 (C.G. Cusick)
1 - 67-137786 (J.H. Gale)
1 - 67-235807 (J.F. Kehoe, Jr.)

1 - 67-162996 (T.J. McAndrews).
1 - 67-187428 (E.J. Powers)
1 - 67-27215 (Alex Rosen)
1 - 67-170129 (J.A. Sullivan)

NAME James Henry Sale

Date:

Recommended by:

BUSINESS ADDRESS & TITLE Last Employment:

Executive Assistant to the Vice Chairman of
Arrangements Committee Republican National Convention TEL:

HOME ADDRESS & legal voting residence 3307 Rocky Mount Road,

Fairfax, Virginia 22030

TEL:

DATE AND PLACE OF BIRTH 9-28-21, Cleveland, Ohio

NATIONALITY AND CITIZENSHIP American, U. S. Citizen

MARITAL STATUS Married CHILDREN Two

EDUCATIONAL BACKGROUND (Degrees Held) LL. B. John Marshall School of
Law, Cleveland, Ohio

MILITARY SERVICE U. S. Navy 1944 to 1946

BUSINESS CAREER DESCRIPTION Special Agent FBI 6-21-43 to 10-1-71.

Assistant Special Agent in Charge, Anchorage. Special Agent in Charge

Anchorage, Richmond, Cincinnati, Chicago, Washington, D. C., FBI Offices,

Assistant Director, Inspection Division and Special Investigative Division, FBI
Headquarters.

AVOCATIONAL INTERESTS & POSITIONS

POLITICAL AFFILIATION; Experience and/or offices held

PRESENT AND PAST MEMBERSHIPS & POSITIONS HELD (Professional, Scientific
Business, or cultural societies and conferences)

ATTACH COMPLETE RESUME

UNITED STATES GOVERNMENT

Memorandum

TO : Mr. Walsh *ew*

DATE: July 12, 1974

FROM: *R.G.H.* R. G. Hunsinger

SUBJECT: JAMES H. GALE
Former Assistant Director
EOD: 11-29-39, Typist
EOD: 6-21-43, Special Agent
RETIRED: 10-1-71
HEARING LOSS CLAIM-SETTLEMENT

Assoc. Dir. _____
Dep. AD Adm. _____
Dep. AD Inv. _____
Asst. Dir.: _____
Admin. ☒ _____
Comp. Syst. _____
Ext. Affairs _____
Files & Com. _____
Gen. Inv. _____
Ident. _____
Inspection _____
Intell. _____
Laboratory _____
Plan. & Eval. _____
Spec. Inv. ☒ b6
Training _____
Legal Coun. _____
Telephone Rm. _____
Director Sec'y _____

Mr. Gale's hearing loss claim has been adjudicated in the amount of a \$20,769.20 scheduled award, finding a 20% binaural loss of hearing.

By letter dated 7-5-74 (attached), Office of Federal Employees' Compensation (OFEC) announced their ruling indicating Mr. Gale's initial payment to be \$8,381.86, with monthly payments of \$2,076.92 following until the total amount has been paid to him. The finding of a 20% binaural loss resulted in 40 weeks' compensation since 200 weeks is the maximum allowable award. His weekly compensation is equal to \$519.23, based upon his salary (\$36,000) at time of retirement.

RECOMMENDATION:

None. For information only.

TLK
TLK/msy (2)
Enc. *1*

EW
12F
188
67-526-526
5 JUL 1974
TLK

OFFICE OF FEDERAL EMPLOYEES' COMPENSATION

July 5, 1974

Mr. James H. Gale
3307 Rocky Mout Road
Fairfax, Virginia 22030

FILE NO.

A25-33968

DATE OF INJURY

Pr 8-20-73

UNDER THE SCHEDULED AWARD PROVISIONS OF 5 U.S.C. 8101 ET SEQ., OFEC MAKES THE FOLLOWING

A W A R D O F C O M P E N S A T I O N

NO. OF WEEKS OF COMPENSATION 40	WEEKLY PAY \$ 692.31	PERCENTAGE OF PAY RATE <input checked="" type="checkbox"/> 75% (ONE OR MORE DEPENDENTS) <input type="checkbox"/> 66-2/3% (NO DEPENDENTS)	WEEKLY COMPEN- SATION \$ 519.23
---	-----------------------------	--	---

DEGREE AND NATURE OF PERMANENT DISABILITY

20% binaural loss of hearing

PERIOD OF AWARD

3-6-74 to 12-10-74

IF ENTITLED TO COST-OF-LIVING ADJUSTMENTS, YOUR WEEKLY COMPENSATION IS

N/A

YOUR FIRST CHECK AND THE PERIOD COVERED

Total award — \$20,769.20

\$8381.86 representing compensation for schedule award from 3-6-74 to 6-26-74

YOUR CONTINUING CHECKS EACH FOUR WEEKS WILL BE

\$2076.92

YOUR COMPENSATION STOPS WHEN YOU HAVE BEEN PAID FOR THE LAST DAY SHOWN ABOVE IN PERIOD OF AWARD

COPY SENT TO: U.S. Civil Service Commission

Director
Federal Bureau of Investigation
Washington, D.C. 20535

BY ORDER OF THE DIRECTOR
OFFICE OF FEDERAL EMPLOYEES'

PLEASE SEE INSTRUCTIONS ON OTHER SIDE

FORM GA-121
REV. APR. 1972

IMPORTANT INFORMATION

PLEASE READ ALL THE FOLLOWING INSTRUCTIONS CAREFULLY. EACH ITEM CONTAINS IMPORTANT INFORMATION. KEEP THIS AWARD SO YOU CAN REFER TO IT WHEN NECESSARY. WRITE TO THE OFFICE OF FEDERAL EMPLOYEES' COMPENSATION IF YOU HAVE QUESTIONS ABOUT THIS AWARD.

1. HOW COMPENSATION IS PAID - If the award runs for a sufficient period of time, compensation is paid by check each 4 weeks. OFEC approves the payments and the Treasury Department sends the check. Your first check will be mailed within 15 days. Subsequent checks will be dated the last day of the 4-week period for which payment is due. At the end of the award there may be a short delay in mailing the last check because of auditing requirements.

2. DELIVERY OF CHECK - Notify OFEC if you fail to receive a check within 10 days after it is due. Send a letter reporting non-receipt of a check over your signature to the address shown on the face of this award. Include your file number, your address including ZIP code, and the amount of the check.

3. CHANGE OF ADDRESS - Notify OFEC promptly if you change the address to which checks are to be sent. Send a letter reporting a change of address over your signature to the address shown on the face of this award. Include your file number, your old address, and your new address with ZIP code. We suggest that you also notify your Postmaster of the change in address so he can forward your mail to you.

4. PERCENTAGE OF PAY RATE - If your award is paid at the augmented rate of 75% because of one or more dependents, you are required to notify OFEC immediately of any change in status of such dependents. Include your file number, the name of the dependent whose status changed, the date of the change, and the nature of the change in status. Mail the notice to the address shown on the face of this award. If you claimed only one dependent, no checks should be cashed after the change in status of this dependent. Return them promptly to the Treasury Department for subsequent adjustment by OFEC.

5. RETURN TO WORK - You may work or receive Civil Service benefits during the period of this award. Earnings from employment or the receipt of such benefits will not affect your award payments.

6. EXPIRATION OF AWARD - After this award expires your right to compensation will be based on any loss of wage-earning capacity caused by your disability. You may claim continuing compensation by submitting evidence showing that your disability prevents you from performing the kind of work you were doing when injured and from earning comparable wages. Mail evidence to the address shown on the face of this award.

7. RECONSIDERATION - If you disagree with the terms of this award *and have other evidence which you believe to be pertinent*, you may at any time ask OFEC for reconsideration. No special form is required, but the request must be in writing and state clearly the grounds upon which reconsideration is requested. Also, the request must be accompanied by evidence not previously submitted, such as medical reports, affidavits, or statements. In order to insure that you receive a new and independent evaluation of the evidence, your case will be reconsidered by persons other than those who made the original determination. Address your request for reconsideration, along with the new evidence, to the *Director, Office of Federal Employees' Compensation, Washington, D. C. 20211*.

8. HEARING - If you disagree with the terms of this award *and your injury occurred on or after July 4, 1966*, you may, *within 30 days after the date of this decision*, ask for a hearing before an OFEC representative. At the hearing you will be afforded an opportunity to present evidence, either oral or written, in further support of your claim. The hearing will be informal and will be held at a convenient location. You may be represented at the hearing by any person authorized by you in writing. As soon as possible after the hearing a copy of the OFEC representative's decision will be mailed to you. You will have the right to appeal this decision. Address the request for hearing to the *Director, Office of Federal Employees' Compensation, Washington, D. C. 20211*.

9. APPEAL - If you believe that all available evidence has been submitted, you have the right to appeal to the Employees' Compensation Appeals Board for review of the decision. Review by the Appeals Board is limited to the evidence of record. No new evidence may be submitted to the Board. A request for review by the Appeals Board should be made within 90 days from the date of this award and should be addressed to the *Employees' Compensation Appeals Board, Washington, D. C. 20210*. If you should request a hearing or reconsideration by the Office of Federal Employees' Compensation as indicated above, the 90-day period within which you may request review by the Appeals Board will run from the date of any later decision by the OFEC. For good cause shown the Appeals Board may waive the failure to file within 90 days if application is made within 1 year from the date of this award.

March 6, 1974

Mr. Joseph A. Gallant
Chief, Branch of Claims
Office of Federal Employees' Compensation
United States Department of Labor
Washington, D. C. 20211

Your File No. **A25-33968**
Date of Injury **Unknown**
Former Special Agent - Retired
James H. Gale
(Name)

Dear Mr. Gallant:

☒ Reference is made to your letter dated **February 8, 1974**

☒ Enclosed are compensation forms and/or other information (indicated below), relative to injuries or diseases incurred by the above-named employees of this Bureau.

☐ CA-1 ☐ CA-2 ☒ **CA-2a** ☐ ☐

☐ The desired information is being obtained and will be furnished to your agency within the near future.

☒ The following information is enclosed: **Enclosed are, a statement from Mr. [redacted] a "To Whom it May Concern" statement concerning noise level tests, copy of Firearms Record and copies of his pre-employment physical examination report and all subsequent physical examination reports.**

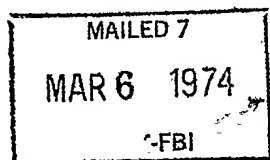
b6

Very truly yours,

Clarence M. Kelley
Clarence M. Kelley
Director

Enc. **(33)**

JGC
(3)



PLEASE DO NOT MUTILATE THIS MATERIAL IN ANY WAY

GALE, JAMES H.

Name

Material sent to

☒ OFEC ☐ File

3-5-74

Date

JGC

3-518 (Rev. 11-17-72)

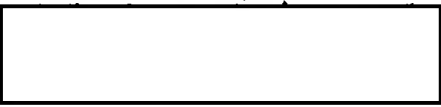
ENCLOSURE

3/5/74

U.S. DEPARTMENT OF LABOR
EMPLOYMENT STANDARDS ADMINISTRATION
OFFICE OF FEDERAL EMPLOYEES' COMPENSATION

NOTICE OF
RECURRENCE OF DISABILITY

IMPORTANT: BEFORE COMPLETING THIS FORM PLEASE READ CAREFULLY THE INSTRUCTIONS ON THE BACK.

1. NAME OF INJURED EMPLOYEE (last, first, middle) Gale, James Henry		2. SOCIAL SECURITY NUMBER 294-01-8383	3. OFEC file number for original injury (if known) X-253155 and A25-33968	
4. HOME MAILING ADDRESS (include zip code) 3307 Rocky Mount Road, Fairfax, Virginia 22030			5. HOME TELEPHONE Area Code 703 Number 273-1661	
6. NAME AND ADDRESS OF EMPLOYING ESTABLISHMENT at time of original injury (number, street, city, state, zip code) FBI, Cleveland, Ohio		7. NAME AND ADDRESS OF EMPLOYING ESTABLISHMENT at time of recurrence, if other than 6. FBI, Washington D. C.		
8. DATE AND HOUR of original injury (mo., day, year) 8-20-46 <input type="checkbox"/> a.m. <input checked="" type="checkbox"/> p.m.	9. DATE AND HOUR of recurrence (mo., day, year) 10-1-71 (Retired) <input type="checkbox"/> a.m. <input checked="" type="checkbox"/> p.m.	10. DATE AND HOUR stopped work following recurrence (mo., day, year) NA <input type="checkbox"/> a.m. <input checked="" type="checkbox"/> p.m.	11. DATE AND HOUR pay stopped following recurrence (mo., day, year) NA <input type="checkbox"/> a.m. <input checked="" type="checkbox"/> p.m.	
12. PAY RATE IN EFFECT ON: A. Date of Recurrence B. Date Stopped Work Following Recurrence		a. Base pay \$36,000 per annum	b. Subsistence \$ per	c. Quarters \$ per
		d. Other pay \$ per		
13. Show work week at time pay stopped, if other than Monday thru Friday S M T W T F S		14. DATE AND HOUR returned to work, following recurrence (mo., day, year) NA <input type="checkbox"/> a.m. <input checked="" type="checkbox"/> p.m.		15. At time of recurrence did official superior authorize medical treatment? <input type="checkbox"/> YES NA <input type="checkbox"/> NO
16. DATE employee first received medical treatment following recurrence (mo., day, year) Unknown		17. NAME AND ADDRESS of physician treating employee following recurrence Unknown		
18. Describe the circumstances of the recurrence of disability as reported by the employee. If his condition gradually worsened over a period of time, describe the progress of the condition from the time he returned to work up to the date of recurrence. Unknown				
19. After returning to work following the original injury, was the employee handicapped or in any way limited in performing his usual duties? <input type="checkbox"/> YES <input type="checkbox"/> NO (If yes, explain) Unknown				
20. Signature of official superior 		21. Title Supervisory Special Agent Personnel Section		22. Official superior's work phone number 324-3881
				23. DATE (mo., day, year) 3-5-74

INSTRUCTIONS FOR COMPLETING FORM CA-2a

RECURRENCE OF DISABILITY

Definition of Recurrence: When, after returning to work, an injured employee is again disabled and stops work as a result of the original injury or occupational disease, such disability is considered by OFEC to be a recurrence. In these instances a form CA-2a is required. If a new incident occurs, the matter should be treated as a new injury and form CA-1 & 2, etc., submitted accordingly.

1. Form CA-2a should be submitted promptly by the official superior upon receiving notice that the employee has suffered a recurrence.
2. If the original injury was not previously reported to OFEC, a report specifically covering the original injury should be made on form CA-1 & 2 and attached when form CA-2a is submitted. Medical reports concerning the original injury should also be attached, if not previously submitted.
3. When the employee has received medical care as a result of the recurrence, a detailed medical report should be submitted by the attending physician. The report should include: dates of examination and treatment; history given by the employee; findings; results of x-ray and lab tests; diagnosis; course of treatment, and the physician's opinion, with medical reasons, regarding causal relationship between employee's condition and the original injury.

If the employee was treated by other physicians after returning to work following his original injury, similar medical reports should be obtained from each.

4. If the recurrence happened six months or more after the employee returned to duty following the original injury, A STATEMENT FROM

THE EMPLOYEE SHOULD ACCOMPANY THE FORM CA-2a. The statement should describe the employee's duties upon his return to work, state whether he had any other injuries or illness and give a general description of his physical condition during the intervening period.

5. If the employee wishes to claim compensation as a result of the recurrence and a form CA-4 was not submitted following the original injury one should be submitted at this time. If form CA-4 was previously filed, compensation may be claimed by filing form CA-8. A medical report on form CA-20 (or in narrative form) must also be completed in accordance with the applicable instructions.
6. If the recurrent disability has not ended at the time form CA-2a is submitted, form CA-3, Termination of Disability, should be forwarded when the employee returns to work.
7. In the event the employee is not able to return to his same duties and suffers pay loss as a result of his disability, he may be entitled to additional compensation based on loss of wages, or loss of wage earning capacity. Upon notification of such loss, OFEC will advise the employee of the procedure to follow to claim additional compensation.



UNITED STATES DEPARTMENT OF JUSTICE

FEDERAL BUREAU OF INVESTIGATION

WASHINGTON, D.C. 20535

TO WHOM IT MAY CONCERN:

RE: NOISE LEVEL TESTS OF FBI
FIREARMS RANGES CONDUCTED
BY THE FBI LABORATORY AT
QUANTICO, VIRGINIA AND
WASHINGTON, D. C.

Because available guidelines to estimate the hearing damage risk associated with impulse noise, such as gunfire, differ from the Maximum Recommended Noise Exposure regulations promulgated under authority of the Occupational Safety and Health Act of 1970 (Federal Register 36 (105), 10518 (May 29, 1971)) definitions of measurements made as well as some detail regarding measurement conditions and equipment used are set out with the results of these measurements.

GENERAL BASIS AND DEFINITIONS
FOR MEASUREMENTS CONDUCTED

The tests conducted are based on available literature relating to hearing damage risk associated with impulse noise, such as gunfire, defined as brief noises lasting less than one second. Measurements have been made of two parameters (Peak Pressure Level and B-Duration) of the single impulse from various weapons with various ammunitions under typical and average circumstances.

These two parameters can be related to proposed damage-risk criterion for impulse noise (gunfire), Report of Working Group 57, NAS-NRC Committee on Hearing, Bioacoustics, and Biomedics (CHABA), W. D. Ward et al (July, 1968) also reported by the National Bureau of

TO WHOM IT MAY CONCERN:
RE: NOISE LEVEL TESTS

Standards in "Fundamentals of Noise: Measurement, Rating Schemes and Standards" published by U. S. Government Printing Office Publication NTID 300.15 for the U. S. Environmental Protection Agency (12-31-71). These two parameters are defined as follows:

1. The Peak Pressure Level (P) is the highest instantaneous pressure level (in decibels, Re. $2.0 \times 10^{-5} \text{ N/M}^2$) reached at any time by the impulses, measured at the position of the ear but away from the individual.
2. The Pressure-Envelope Duration or B-Duration is the total time that the envelope of the pressure fluctuations, both positive and negative, are within 20 db of the peak pressure level. Included in this time is the duration of that part of any reflection pattern that is within 20 db of the peak level.

MEASUREMENT TEST CONDITIONS
AND MEASUREMENT EQUIPMENT

OUTDOOR RANGE

Measurements were conducted on the outdoor range of the FBI Academy at Quantico, Virginia, in an open field over grass. Measuring microphones were located in an orientation and at a distance from various weapons to approximate the location of the shooter's nearest ear. Weapons were fired with the shooter removing himself as far as possible from the field of the measuring microphone. Results for each weapon and type of ammunition are the average of several individual firings. Peak Pressure Levels (P) and B-Duration were measured from calibrated photographs of oscilloscope traces, and were checked against simultaneous impulse precision sound level meter measurements.

Equipment used to make these measurements includes Bruel and Kjaer (B&K) Impulse Precision Sound Level Meters type 2209, type 4136 1/4" condenser microphone associated preamplifiers and power supplies and Tektronix Model 564 Oscilloscope with C30 camera. Calibration was done with a B & K type 4220 Pistonphone.

TO WHOM IT MAY CONCERN:
RE: NOISE LEVEL TESTS

It is felt these measurements represent typical and average sound levels and durations which would occur at the shooters' ears without ear protection for the weapons and ammunitions measured.

RESULTS OF MEASUREMENTS

Outdoor Range

The following measurement results are set out by type of weapon and ammunition and are the average of a number of firings of each. The two measurements given are P (Peak Pressure Level in decibels (db)) and B (B-Duration in milliseconds):

1. Weapon: 38 caliber Smith and Wesson Special Revolver with 4-inch barrel
 - (a) Ammunition - 148 grain target load
P - 156 db B - 1.8 msec
 - (b) Ammunition - 158 grain service load
P - 157.7 db B - 1.9 msec
2. Weapon: 38 caliber Smith and Wesson Special Revolver with 2-inch barrel
 - (a) Ammunition - 148 grain target load
P - 159.2 db B - 1.6 msec
3. Weapon: Model 870 Remington Shotgun
 - (a) Ammunition - Skeet load
P - 160.8 db B - 2.9 msec
 - (b) Ammunition - 00 buck shot
P - 160.3 db B - 3.6 msec
 - (c) Ammunition - rifle slug maximum load
P - 159.5 db B - 6.3 msec
4. Weapon: .308 Remington Carbine Rifle with 150 grain ammunition
 - (a) Open area over grass
P - 159.6 db B - 2.8 msec
 - (b) on Rifle Deck
P - 158.3 db B - 5.4 msec

TO WHOM IT MAY CONCERN:
RE: NOISE LEVEL TESTS

MEASUREMENT TEST CONDITIONS

INDOOR RANGE

Measurements were conducted on the indoor range at FBI Headquarters located in the basement of the Justice Department Building, Washington, D. C. Measurement microphones were located in an orientation and at a distance from the gun to approximate the location of the shooter's nearest ear. The gun was fired at one of the center shooter positions with the shooter removing himself as far as possible from the field of the measuring microphones and with the protective plexiglass screens closed behind the shooter. Results for each type of ammunition are the average of several individual firings. Peak Pressure Levels (P) and B-Durations were measured from calibrated photographs of oscilloscope traces and were checked against simultaneous impulse precision sound level measurements.

RESULTS OF MEASUREMENTS

Indoor Range

The following measurement results are for a 38 caliber Smith and Wesson Special Revolver with 4-inch barrel and are felt to represent typical and average sound levels and durations which would occur at the shooter's ears without ear protection on the indoor range. The two measurements given are P (Peak Pressure Level) and B (B-duration in milliseconds):

1. Ammunition: 148 grain target load
P - 154.4 db B - 23.7 msec
2. Ammunition: 158 grain service load
P - 156.9 db B - 23 msec

March 5, 1974

TO WHOM IT MAY CONCERN:

RE: JAMES H. GALE

Information has been requested concerning the exposure of former Special Agent James H. Gale to the noise of firearms. He was a Special Agent from June 21, 1943, to October 1, 1971. He was on military leave from October 16, 1944 to March 27, 1946 (U. S. Navy).

Gale was assigned to the following listed offices during his career:

October 14, 1943 assigned to Dallas, Texas
February 9, 1944 transferred to Omaha, Nebraska
Military service as listed above
March 27, 1946 assigned to Cleveland, Ohio
November 4, 1951 transferred to Anchorage, Alaska
March 2, 1955 transferred to Richmond, Virginia
February 27, 1956 transferred to Cincinnati, Ohio
September 17, 1956 transferred to Washington, D. C.
May 11, 1959 transferred to Washington, D. C., Field Office
November 21, 1960 transferred to Chicago, Illinois
October 16, 1962 transferred to Washington, D. C.
Retired October 1, 1971

Gale attended New Agents' Training from June 21, 1943 to October 9, 1943. During this training he fired approximately 850 rounds of ammunition. This firing would have included the .38 caliber revolver, .30 caliber rifle, and the .45 caliber Thompson submachine gun.

From 1942 through 1952 firearms training was scheduled seven times on an outdoor range and five times on an indoor range each year. Gale would have fired approximately 1200 rounds each year during this period. From 1952 through 1971 firearms training was scheduled four times on an outdoor range and four times on an indoor range each year. Gale would have fired approximately 720 rounds each year.

Re: James H. Gale

Records reflect that he attended In-Service Training on six different occasions. At each of these retraining sessions he fired approximately 360 rounds of ammunition. This firing would have included the .38 caliber revolver, .30 caliber rifle, the .45 caliber Thompson submachine gun, and the 12-guage shotgun.


Joe David Jamieson
Assistant Director

February 13, 1974

Mr. Joseph A. Gallant
Chief, Branch of Claims
Office of Federal Employees' Compensation
United States Department of Labor
Washington, D. C. 20211

Your File No. **A25-33968**
Date of Injury **Unknown**
Former Special Agent - Retired
James H. Gale
(Name)

Dear Mr. Gallant:

- ☒ Reference is made to your letter dated February 8, 1974
- ☐ Enclosed are compensation forms and/or other information (indicated below), relative to injuries or diseases incurred by the above-named employees of this Bureau.
- ☐ CA-1 ☐ CA-2 ☐ ☐ ☐
- ☒ The desired information is being obtained and will be furnished to your agency within the near future.
- ☐ The following information is enclosed:

Very truly yours,

Clarence M. Kelley
Clarence M. Kelley
Director

Enc. (0)

JGC
(3)

MAILED 20

FEB 13 1974

FBI

MAIL ROOM ☐

TELETYPE UNIT ☐

(25749)

U.S. DEPARTMENT OF LABOR
EMPLOYMENT STANDARDS ADMINISTRATION

Office of Federal Employees' Compensation

Washington, D.C. 20211

February 8, 1974

File No. A25-33968



Director,
U.S. Department of Justice
Federal Bureau of Investigation
Washington, D.C. 20535

Dear Sir:

Mr. James H. Gale has filed claim for compensation claiming he has a hearing loss resulting from his exposure to gun for noise while employed as a Special Agent. Enclosed are copies of Form CA-4, Form CA-1&2 and Form CA-2a. Please complete form CA-2a with his last date of employment as the date of recurrence.

Also enclosed is a copy of Mr. Gale's letter of August 20, 1973. Please have the statement reviewed by his official superior with comments as to the contents.

For consideration of his claim please describe briefly the type of work he performed and describe his exposure to noise with the extent and duration of such exposure. During what periods of time did he work for you?

Please furnish a report of a noise survey showing the decibel levels of noise at the locations where he was exposed.

Furnish copies of all audiogram and other medical records pertaining to hearing and/or ear problems which are available to you and furnish any other information available regarding any difficulty with his hearing or his ears while working for you.

Sincerely,

Joseph A. Gallant
JOSEPH A. GALLANT
Chief, Branch of Claims

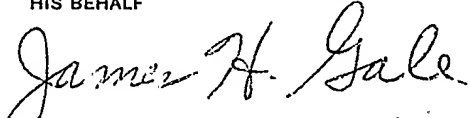
Let to Patient
gg
2-13-74

4 ENCLOSURE

Mr. James H. Gale
3307 Rocky Mount Road
Fairfax, Va. 22030

THREE

Include your address, ZIP code, and file number on all correspondence

U.S. DEPARTMENT OF LABOR EMPLOYMENT STANDARDS ADMINISTRATION BUREAU OF EMPLOYEES' COMPENSATION		FEDERAL EMPLOYEE'S NOTICE OF INJURY OR OCCUPATIONAL DISEASE	
1. NAME OF INJURED EMPLOYEE (Last, first, middle) Gale, James Henry		2. DATE OF BIRTH (Mo., day, year) 9-28-21	3. <input checked="" type="checkbox"/> MALE <input type="checkbox"/> FEMALE
		4. SOCIAL SECURITY NUMBER 294-01-8383	
5. HOME MAILING ADDRESS (Number, street, city, state, zip code) 3307 Rocky Mount Road, Fairfax, Virginia, 22030		6. HOME TELEPHONE AREA CODE 703 NUMBER 273-1661	
7. NAME AND ADDRESS OF EMPLOYING ESTABLISHMENT (Name, number, street, city, state, zip code) Federal Bureau of Investigation, 9th & Penn. Avenue, Washington, D. C.			
8. PLACE WHERE INJURY OCCURRED (e.g., 2nd floor, building 402, Andrews Air Force Base) Original injury occurred at firearms range, Camp Perry, Ohio, and aggravated at numerous other FBI ranges throughout the country			
9. DATE AND HOUR OF INJURY (Mo., day, year) 8-20-46 originally <input type="checkbox"/> AM Remainder unknown <input type="checkbox"/> PM	10. DATE OF THIS NOTICE (Mo., day, year) 8-20-73	11. OCCUPATION Special Agent, Special Agent in Charge, Inspector, and Assistant Director—FBI	
12. CAUSE OF INJURY (Describe how and why injury occurred) Hearing loss occasioned by use of firearms in course of employment with the F.B.I. At first it was not known whether injury temporary or permanent. It is now known that injury is permanent and irreversible.			
13. NATURE OF INJURY (Name part of body affected—fractured left leg, bruised right thumb, etc.) Hearing loss—please see attached medical reports.			
14. NAMES OF WITNESSES TO INJURY (If none, so state) Original injury, Special Agent Fern C. Stukenbroker and Special Agent in Charge Ewell C. Richardson.			
15. IF THIS NOTICE WAS NOT GIVEN WITHIN 48 HOURS AFTER THE INJURY, EXPLAIN REASON FOR DELAY. IF EARLIER NOTICE WAS GIVEN VERBAL OR WRITTEN, STATE WHEN AND TO WHOM. Please see attached material re C.A. 1 and 2 forms submitted in 1946			
I certify that the injury described above was sustained in the performance of my duties as an employee of the U.S. Government and that it was not caused by my willful misconduct, intention to bring about the injury or death of myself, or another, nor by my intoxication. I hereby make claim for compensation and medical treatment to which I may be entitled by reason of this injury.		16. SIGNATURE OF INJURED EMPLOYEE OR PERSON ACTING ON HIS BEHALF 	
17. STATEMENT OF WITNESS: DESCRIBE WHAT YOU SAW, HEARD OR KNOW ABOUT THIS INJURY Please see witness reports in 1946 report.			
19. DATE (Mo., day, year) 25 AUG 27 1973		19. DATE (Mo., day, year) 8-20-73	

4 ENCLOSURE

CA-1 & 2

Rev. July 1970

U. S. DEPARTMENT OF LABOR
EMPLOYMENT STANDARDS ADMINISTRATION
BUREAU OF EMPLOYEES' COMPENSATION

CLAIM FOR COMPENSATION ON ACCOUNT OF INJURY
OR OCCUPATIONAL DISEASE

1. NAME OF INJURED EMPLOYEE (Last, first, middle) Gale, James Henry	2. HOME MAILING ADDRESS (Number, street, city, state, zip code) 3307 Rocky Mount Road, Fairfax, Virginia 22030
3. DATE AND HOUR OF INJURY (Mo., day, year) 8-20-46 and aggravated over 11:04 <input type="checkbox"/> AM <input type="checkbox"/> PM years of FBI career	4. PERIOD COMPENSATION IS CLAIMED AS A RESULT OF PAY LOSS (Mo., day, year) FROM Scheduled Permanent Impairment

5. HAS ANY PAY BEEN RECEIVED FOR THE PERIOD SHOWN IN ITEM 4? ☐ YES ☒ NO
IF YES, STATE FULL AMOUNT AND SHOW INCLUSIVE DATES DURING WHICH PAY WAS RECEIVED (Mo., day, year)
AMOUNT \$ DATES: FROM TO

6. HAS CLAIM BEEN MADE AGAINST ANY THIRD PARTY FOR DAMAGES AS A RESULT OF THIS INJURY? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO IF YES, FURNISH →	A. NAME AND ADDRESS OF THIRD PARTY	B. AMOUNT OF RECOVERY
---	------------------------------------	-----------------------

7. WERE YOU EVER IN THE ARMED FORCES OF THE UNITED STATES? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO IF YES, FURNISH →	A. SERVICE NUMBER 949-92-44	B. BRANCH OF SERVICE U. S. Navy	C. PERIOD OF SERVICE FROM 8-44 THROUGH 2-46
---	---------------------------------------	---	---

8. IF ANSWER TO 7 IS YES, HAVE YOU APPLIED FOR OR RECEIVED COMPENSATION OR PENSION, INCLUDING RETIREMENT OR RETAINER PAY, BASED ON SUCH SERVICES? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO IF YES, FURNISH →	A. CLAIM NUMBER	B. NAME AND ADDRESS OF OFFICE WHERE CLAIM IS FILED	C. NATURE OF DISABILITY AND MONTHLY PAYMENT RECEIVED
--	-----------------	--	--

9. HAVE YOU APPLIED FOR OR RECEIVED AN ANNUITY UNDER THE U.S. CIVIL SERVICE RETIREMENT ACT OR ANY OTHER FEDERAL RETIREMENT OR DISABILITY LAW? Regular FBI retirement upon reaching 50 Yr. with over 20 years Service. <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO IF YES, FURNISH →	A. CLAIM NUMBER CSA 13546920	B. DATE ANNUITY BEGAN (Mo., day, year) 10-1-71	C. AMOUNT OF MONTHLY PAYMENT \$1883.00
--	--	--	--

10. LIST YOUR DEPENDENTS (If none so state)			IS DEPENDENT LIVING WITH YOU?	IF NOT, SHOW MAILING ADDRESS
NAME	RELATIONSHIP	DATE OF BIRTH	NO	

11. FOR DEPENDENTS NOT LIVING WITH YOU, SHOW AMOUNTS THAT YOU PAY FOR THEIR SUPPORT, TO WHOM PAID, AND PAYEE'S ADDRESS. STATE WHETHER SUCH PAYMENTS WERE ORDERED BY A COURT.

12. I hereby make claim for compensation on account of the injury described above, which was sustained by me while in the performance of my duty for the United States, said injury not being due to willful misconduct on my part or to my intention to bring about the injury or death of myself or another, or to my intoxication. I have been disabled on account of this injury and have not refused or failed to perform any work I was able to do during the period for which compensation is claimed and every statement set forth above in support of my claim is true to the best of my knowledge and belief.

James H. Gale (Signature of employee or person acting on his behalf) **8-20-73** (Date)

DEC 24 AUG 27 1973

DEC 25 1973

CA-4
Rev. July 1970

STATEMENT OF OFFICIAL SUPERIOR

13. NAME AND MAILING ADDRESS OF REPORTING OFFICE (Name, number, street, city, state, zip code)			14. DATE AND HOUR PAY STOPPED (Mo, day, year) <input type="checkbox"/> AM <input type="checkbox"/> PM	
15. PAY RATE AS OF:				
	BASE PAY		SUBSISTENCE	
A. DATE OF INJURY	\$	PER	\$	PER
B. DATE EMPLOYEE STOPPED WORK	\$	PER	\$	PER
C. DATE OF RECURRENCE (if any)	\$	PER	\$	PER
16. IF EMPLOYEE RECEIVES OTHER ADDITIONAL PAY, SUCH AS PREMIUM, SUNDAY, OR NIGHT DIFFERENTIAL IDENTIFY TYPE AND SHOW AMOUNT.			17. SHOW WORKWEEK AT TIME PAY STOPPED IF OTHER THAN MONDAY THROUGH FRIDAY	
TYPE	\$	PER	S M T W T F S	
18. SHOW INCLUSIVE DATES EMPLOYEE RECEIVED PAY FOR ANY PART OF THE PERIOD SHOWN IN 4 ON THE FRONT OF THIS FORM				
ANNUAL LEAVE:		SICK LEAVE:		OTHER
FROM	TO	FROM	TO	FROM TO
19. DID THE EMPLOYEE WORK IN THE POSITION HELD AT THE TIME OF INJURY FOR A FULL ELEVEN MONTHS IMMEDIATELY PRIOR TO THE INJURY? <input type="checkbox"/> YES <input type="checkbox"/> NO			20. IF ANSWER TO 19 IS NO, WOULD THE POSITION HAVE AFFORDED EMPLOYMENT FOR ELEVEN MONTHS EXCEPT FOR THE INJURY? <input type="checkbox"/> YES <input type="checkbox"/> NO	
21. HEALTH BENEFIT SUBSCRIPTIONS				
A. WAS EMPLOYEE ENROLLED IN A HEALTH BENEFITS PLAN ON DATE PAY STOPPED? <input type="checkbox"/> YES <input type="checkbox"/> NO				
B. IF ANSWER TO A IS YES, FURNISH ENROLLMENT CODE NUMBER 				
C. IF ANSWER TO A IS YES, SHOW ENDING DATE OF PAY PERIOD THROUGH WHICH DEDUCTIONS WERE LAST MADE (Mo, day, year)				
22. FEDERAL EMPLOYEE'S OPTIONAL GROUP LIFE INSURANCE				
A. WAS EMPLOYEE ENROLLED IN OPTIONAL INSURANCE ON DATE OF INJURY? <input type="checkbox"/> YES <input type="checkbox"/> NO				
B. IF ANSWER TO A IS YES, FURNISH ENROLLMENT CODE NUMBER 				
C. IF ANSWER TO A IS YES, SHOW ENDING DATE OF PAY PERIOD THROUGH WHICH DEDUCTIONS WERE LAST MADE (Mo, day, year)				
23. (check one)				
<input type="checkbox"/> EMPLOYEE HAS NOT RETURNED TO WORK				
<input type="checkbox"/> EMPLOYEE HAS RETURNED TO WORK (if this box is checked complete items 24 through 27)				
24. DATE AND HOUR RETURNED TO WORK (Mo, day, year) <input type="checkbox"/> AM <input type="checkbox"/> PM			25. SHOW EMPLOYEE'S WORKWEEK ON RETURN TO DUTY IF OTHER THAN MONDAY THROUGH FRIDAY	
			S M T W T F S	
26. SHOW EMPLOYEE'S RATE OF PAY ON RETURN TO DUTY				
BASE PAY		SUBSISTENCE		OTHER
\$	PER	\$	PER	\$ PER
27. DID THE RESULTS OF THE INJURY REQUIRE A CHANGE IN THE EMPLOYEE'S WORK ASSIGNMENT ON RETURN TO DUTY?			A. DESCRIBE TYPE OF WORK EMPLOYEE IS NOW PERFORMING	
<input type="checkbox"/> YES <input type="checkbox"/> NO (if yes, complete A) →				
28. I HEREBY CERTIFY THAT THE EMPLOYEE WHO COMPLETED THE CLAIM FOR COMPENSATION ON THE FRONT OF THIS FORM WAS INJURED IN PERFORMANCE OF HIS DUTIES FOR THE UNITED STATES. INFORMATION FURNISHED BY THE EMPLOYEE IS TRUE AND CORRECT WITH THE FOLLOWING EXCEPTIONS: 				
29. SIGNATURE OF OFFICIAL SUPERIOR				
30. TITLE			31. DATE (Mo, day, year)	

U.S. DEPARTMENT OF LABOR
EMPLOYMENT STANDARDS ADMINISTRATION
OFFICE OF FEDERAL EMPLOYEES' COMPENSATION

NOTICE OF
RECURRENCE OF DISABILITY

IMPORTANT: BEFORE COMPLETING THIS FORM PLEASE READ CAREFULLY THE INSTRUCTIONS ON THE BACK.

1. NAME OF INJURED EMPLOYEE (last, first, middle) Gale, James Henry		2. SOCIAL SECURITY NUMBER 294-01-8383		3. OFEC file number for original injury (if known) X-253155													
4. HOME MAILING ADDRESS (include zip code) 3307 Rocky Mount Road, Fairfax, Virginia, 22030				5. HOME TELEPHONE Area Code 703 Number 273-1661													
6. NAME AND ADDRESS OF EMPLOYING ESTABLISHMENT at time of original injury (number, street, city, state, zip code) FBI, Cleveland, Ohio			7. NAME AND ADDRESS OF EMPLOYING ESTABLISHMENT at time of recurrence, if other than 6. FBI, Anchorage, Richmond, Cincinnati, Washington Field, Chicago, and Washington, D. C.														
8. DATE AND HOUR of original injury (mo., day, year) 8-20-46 11:04 a.m. <input type="checkbox"/> a.m. <input type="checkbox"/> p.m.		9. DATE AND HOUR of recurrence (mo., day, year) Over the years of my FBI career <input type="checkbox"/> a.m. <input type="checkbox"/> p.m.		10. DATE AND HOUR stopped work following recurrence (mo., day, year) Did Not stop <input type="checkbox"/> a.m. <input type="checkbox"/> p.m.													
11. DATE AND HOUR pay stopped following recurrence (mo., day, year) Did not stop <input type="checkbox"/> a.m. <input type="checkbox"/> p.m.		12. PAY RATE IN EFFECT ON: Last several years of career A. Date of Recurrence B. Date Stopped Work Following Recurrence		<table border="1"> <tr> <td>a. Base pay \$36,000 per annum</td> <td>b. Subsistence _____</td> <td>c. Quarters _____</td> <td>d. Other pay _____</td> </tr> <tr> <td>\$ per</td> <td>\$ per</td> <td>\$ per</td> <td>\$ per</td> </tr> <tr> <td>\$ per</td> <td>\$ per</td> <td>\$ per</td> <td>\$ per</td> </tr> </table>		a. Base pay \$36,000 per annum	b. Subsistence _____	c. Quarters _____	d. Other pay _____	\$ per	\$ per	\$ per	\$ per	\$ per	\$ per	\$ per	\$ per
a. Base pay \$36,000 per annum	b. Subsistence _____	c. Quarters _____	d. Other pay _____														
\$ per	\$ per	\$ per	\$ per														
\$ per	\$ per	\$ per	\$ per														
13. Show work week at time pay stopped, if other than Monday thru Friday S M T W T F S		14. DATE AND HOUR returned to work, following recurrence (mo., day, year) Not applicable <input type="checkbox"/> a.m. <input type="checkbox"/> p.m.		15. At time of recurrence did official superior authorize medical treatment? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO													
16. DATE employee first received medical treatment following recurrence (mo., day, year) Injury not capable of medical treatment		17. NAME AND ADDRESS of physician treating employee following recurrence Please see attached government and private physician reports.															
18. Describe the circumstances of the recurrence of disability as reported by the employee. If his condition gradually worsened over a period of time, describe the progress of the condition from the time he returned to work up to the date of recurrence. Continued exposure of firearms training over the years after initial injury in 1946 worsened condition of hearing loss according to physicians and my own personal knowledge. At first hearing loss thought to be possibly temporary. It is now known to be permanent and irreversible																	
19. After returning to work following the original injury, was the employee handicapped or in any way limited in performing his usual duties? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO (If yes, explain) Except that I had difficulty hearing.																	
20. Signature of official superior (at time of recurrence)		21. Title		22. Official superior's work phone number													
				23. DATE (mo., day, year)													

JAMES H. GALE
ATTORNEY AT LAW

TELEPHONE 273-1773
AREA CODE 703

SUITE 416, THE MOSBY
10560 MAIN STREET
FAIRFAX, VIRGINIA 22030

August 20, 1973

Mr. Joseph A. Gallant
Chief, Branch of Claims
Office of Federal Employees Compensation
Room 400
666 - 11th Street, N.W.
Washington, D. C.

Re: Claim for loss of hearing -
James H. Gale, former Assistant
Director, F.B.I.

Dear Mr. Gallant

Reference is made to our conversation of August 1, 1973, regarding my claim for hearing loss while employed by the F.B.I.

Pursuant to your request there are also being attached Forms C.A. 1 and 2, 2a, and C.A. 4 and 20. Being submitted hereto is a memorandum from me to the Agent in Charge of the Cleveland F.B.I. Office dated October 15, 1946, together with copies of C.A. 1 and C.A. 2, which were executed and sent to the Bureau of Federal Employees Compensation by the F.B.I. on October 24, 1946. Also submitted at that time was an audiometer test showing a loss of hearing because of an injury sustained by me while attending firearms training on August 20, 1946. At that time it was not known whether the injury to my ears would be permanent or not and by submitting the C.A. 1 and 2 at that time, I was merely perfecting my right to make a future claim.

After this injury in 1946, I continued to receive over the years both indoor and outdoor firearms training on an almost monthly basis. Indoor sessions were confined to shooting the pistol; Outdoor sessions included pistol, rifle, shotgun, Thompson sub-machine gun and tear gas gun. I fired hundreds of rounds of ammunition at these sessions. After the injury to my ears occasioned by the firing of the Thompson Sub-machine guns, the 1946 audiogram reflects that I had a sharp loss of hearing between the 2000 and 4000 audiometer range. For your further information, I am enclosing copies of my annual physical examinations afforded by U. S. Government doctors at the Bethesda Naval Base for the years 1969, 1970 and 1971. Audiometer tests were given each of these years and show a marked loss of hearing from the 2000 to 8000 range with the left ear being worse than the right ear.

JAMES H. GALE
ATTORNEY AT LAW

TELEPHONE 273-1773
AREA CODE 703

SUITE 416, THE MOSBY
10560 MAIN STREET
FAIRFAX, VIRGINIA 22030

-2-

Also attached is an audiological record made on 8-1-73 at the office of Dr. Blair Webb, 2141 K. Street, N. W., Washington, D. C. Dr. Webb is a hearing specialist. The current audiometer reading tells substantially the same story as the tests taken by the military doctors in 1969, 1970, and 1971, i.e. that I have suffered a substantial hearing loss. Dr. Webb advised me that this loss is definitely permanent. He stated that the audiometer reading reflects that my hearing is considerably worse now than it was after the 1946 examination, which he stated was undoubtedly caused by continued exposure to gunfire over the years.

He stated that it is his understanding that the government compensation awards regarding hearing loss is limited to losses of hearing up to the 4000 range, however he stated that losses of the higher tones from 4000 to 8000 definitely effect the ability to sort out and perceive sounds below the 4000 range, particularly when there is any background noise. This is borne out by my experience over the years. I have great difficulty hearing ordinary conversation where there is any background noise whatsoever. Of course there exists in the every-day world in which we live a constant backdrop of background noises. It will also be noted that I have had a constant ringing in my ears for many years which interferes with my ability to hear ordinary conversations.

With regard to ear defenders, please be advised that on the August 20, 1946, incident, I was using dry cotton in my ears. In those days that was all that was used. Over the years, the F.B.I. recognized that this was ineffective as an ear defender and progressed to cotton impregnated with vasoline and in recent years to the hearing ear muffs similar to those worn by the ground crews handling jet airplanes. It was interesting to note that on August 1, 1973, Dr. Webb advised me that he was one of several hearing specialists invited by the F.B.I. to go to the Quantico, Virginia, firearms ranges to make recommendations to remedy the problem.

Regarding your questionnaire, I never had any difficulty with my ears or my hearing prior to 1946. I entered on duty as a Special Agent of the F.B.I., June 21, 1943, and was either a Special Agent, Assistant Special Agent in Charge, Special Agent in Charge of Anchorage, Richmond, Cincinnati, Washington Field and Chicago, Inspector, or Assistant Director until I retired October 1, 1971, at the age of 50. I received even more than the usual monthly firearms training exposure during the period that I was an Assistant Special Agent in Charge, or Special Agent in Charge (1951 to 1962) as I conducted a considerable number of police firearms training programs

JAMES H. GALE
ATTORNEY AT LAW

TELEPHONE 273-1773
AREA CODE 703

SUITE 416, THE MOSSBY
10560 MAIN STREET
FAIRFAX, VIRGINIA 22030

-3-

for the local police. In 1951, I attended an Administrative Firearms Training School for one week at Quantico, Virginia, where I ran firearms lines from 9 A.M. to 5 P.M. for new agents, and in-service agents and was exposed to thousands of rounds of gunfire from pistol, rifle, shotgun, and Thompson sub-machine guns. I have never been exposed to high noise level at any other place than firearms training with the F. B. I. I do not hunt, and have never fired a gun outside my employment with the F.B.I. The only other claim I ever filed regarding this matter is the one regarding the August 20, 1946 injury.

Special Agent Carl A. Harris (Retired F.B.I.) had his hearing loss claim approved within the last 18 months and his claim contains a complete rundown on F.B.I. policy concerning hearing losses. It is respectfully suggested that you may desire to examine his claim in conjunction with this claim.

Thanking you for your cooperation in this matter, I am,

Very truly yours,

James H. Gale
James H. Gale

JHG:bt

Certified Mail
Return Receipt Requested

cc:Federal Bureau of Investigation, 9th & Penn.
Washington, D. C. (Please execute statements of
official superior and forward to Mr. Gallant)

Addendum: My salary for the last several years before retirement was
GS-18 at \$36,000.00 per annum

September 25, 1973

Mr. Joseph A. Gallant
Chief, Branch of Claims
Office of Federal Employees' Compensation
United States Department of Labor

McLachlen Building
666 11th Street, N. W.
Washington, D. C. 20211

Your File No.
Date of Injury Unknown
Former Special Agent
James H. Gale
(Name)

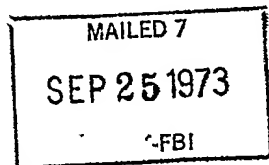
Dear Mr. Gallant:

- ☐ Reference is made to your letter dated _____
- ☐ Enclosed are compensation forms and/or other information (indicated below), relative to injuries or diseases incurred by the above-named employees of this Bureau.
- ☐ CA-1 ☐ CA-2 ☐ ☐ ☐
- ☐ The desired information is being obtained and will be furnished to your agency within the near future.
- ☒ The following information is enclosed: **Enclosed is an unpaid medical bill in the amount of \$45.00.**

Very truly yours,

Clarence M. Kelley
Clarence M. Kelley
Director

Enc. (1)



ENCLOSURE

JGC
(3)
5

RECORDED
SEP 28 1973

MAIL ROOM ☒ TELETYPE UNIT ☐

GEORGETOWN DOCTORS PARK
SUITE 201A
5411 CEDAR LANE
BETHESDA, MARYLAND 20014
(301) 530-8023

UNIVERSITY MEDICAL BLDG.
SUITE 605
2141 K STREET, N.W.
WASHINGTON, D.C. 20037
(202) 223-3560

MCLEAN MEDICAL BLDG.
SUITE 208
1515 CHAIN BRIDGE RD.
MCLEAN, VIRGINIA 22101
(703) 356-5601

Mr. James H. Gale
3307 Rocky Mount Road
Fairfax, Virginia 22030

[illegible]

PLEASE DO NOT MUTILATE THIS MATERIAL IN ANY WAY

OCCUPATION

DOCTOR

M. D.

b6

PLEASE RETURN THIS STA

ANY QUESTIONS REGARDING THIS ST/

GALE, JAMES H.

Name _____

Material sent to

☒ OFEC ☐ File

9-25-73

Date _____

JGC

3-518 (Rev. 11-17-72)

ENCLOSURE

August 29, 1973

Mr. Joseph A. Gallant
Chief, Branch of Claims
Office of Federal Employees' Compensation
United States Department of Labor

McLachlen Building
666 11th Street, N. W.
Washington, D. C. 20211

Your File No.
Date of Injury **Unknown**
Former Special Agent
James H. Gale
(Name)

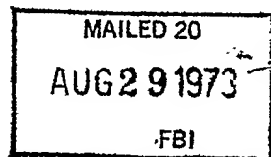
Dear Mr. Gallant:

- ☐ Reference is made to your letter dated _____
- ☒ Enclosed are compensation forms and/or other information (indicated below), relative to injuries or diseases incurred by the above-named employees of this Bureau.
- ☐ CA-1 ☒ CA-2 ☐ ☐ ☐
- ☐ The desired information is being obtained and will be furnished to your agency within the near future.
- ☐ The following information is enclosed:

Enc. (1)

Very truly yours,

Clarence M. Kelley
Clarence M. Kelley
Director



JGC
(3)

MAIL ROOM ☐ TELETYPE UNIT ☐

FEDERAL EMPLOYEE'S NOTICE OF INJURY OR OCCUPATIONAL DISEASE

20. DEPARTMENT OR AGENCY Justice		21. BUREAU OR OFFICE FBI																									
22. NAME AND MAILING ADDRESS OF REPORTING OFFICE (Name, number, street, city, state, zip code) 9th and Pennsylvania Ave., N. W. Washington, D. C. 20535																											
23. DATE REPORTING OFFICE RECEIVED NOTICE OF INJURY (Mo., day, year) Copy of Mr. Gale's letter to OFEC dated 8-20-73 <input type="checkbox"/> VERBAL <input checked="" type="checkbox"/> WRITTEN		25. NAME AND TITLE OF PERSON TO WHOM NOTICE FIRST GIVEN FBI Headquarters received copy of letter to OFEC																									
24. NAME OF SUPERVISOR IN CHARGE WHEN INJURY OCCURRED Unknown		26. DATE AND HOUR OF INJURY (Mo., day, year) Unknown <input type="checkbox"/> AM <input type="checkbox"/> PM																									
27. CIRCLE DAY OF WEEK WHEN INJURY OCCURRED Unknown S M T W T F S		28. HOUR REGULAR WORK BEGINS 9:00 Prior to Retiring 10-1-71 <input checked="" type="checkbox"/> AM <input type="checkbox"/> PM																									
29. HOUR REGULAR WORK ENDS 5:30 Prior to retiring 10-1-71 <input type="checkbox"/> AM <input checked="" type="checkbox"/> PM		30. NUMBER HOURS WORKED PER DAY 8																									
31. CIRCLE DAYS PAID PER WEEK (M T W T F) S		32. DATE AND HOUR STOPPED WORK (Mo., day, year) Unknown <input type="checkbox"/> AM <input type="checkbox"/> PM																									
33. DATE AND HOUR PAY STOPPED (Mo., day, year) Unknown <input type="checkbox"/> AM <input type="checkbox"/> PM		34. DATE AND HOUR RETURNED TO WORK (Mo., day, year) Unknown <input type="checkbox"/> AM <input type="checkbox"/> PM																									
35. INCLUSIVE DATES EMPLOYEE RECEIVED PAY FOR THE PERIOD HE DID NOT WORK (Mo., day, year) <table border="1"><tr><td colspan="2">ANNUAL LEAVE</td><td colspan="2">SICK LEAVE</td><td colspan="2">OTHER</td></tr><tr><td>FROM</td><td>TO</td><td>FROM</td><td>TO</td><td>FROM</td><td>TO</td></tr><tr><td>FROM</td><td>TO</td><td>FROM</td><td>TO</td><td>FROM</td><td>TO</td></tr><tr><td>FROM</td><td>TO</td><td>FROM</td><td>TO</td><td>FROM</td><td>TO</td></tr></table> Unknown				ANNUAL LEAVE		SICK LEAVE		OTHER		FROM	TO	FROM	TO	FROM	TO	FROM	TO	FROM	TO	FROM	TO	FROM	TO	FROM	TO	FROM	TO
ANNUAL LEAVE		SICK LEAVE		OTHER																							
FROM	TO	FROM	TO	FROM	TO																						
FROM	TO	FROM	TO	FROM	TO																						
FROM	TO	FROM	TO	FROM	TO																						
36. WAS THE EMPLOYEE ENGAGED IN HIS USUAL OCCUPATION AT THE TIME THE INJURY OCCURRED? <input type="checkbox"/> YES <input type="checkbox"/> NO IF NO, FURNISH DETAILED EXPLANATION Unknown																											
37. WAS THE EMPLOYEE IN PERFORMANCE OF DUTY AT TIME OF INJURY? <input type="checkbox"/> YES <input type="checkbox"/> NO IF NO, FURNISH DETAILED EXPLANATION OR A COPY OF THE EMPLOYING ESTABLISHMENT'S INVESTIGATION REPORT Unknown																											
38. WAS THE INJURY CAUSED BY WILLFUL MISCONDUCT, INTOXICATION OR INTENT TO BRING ABOUT INJURY TO SELF OR ANOTHER? <input type="checkbox"/> YES <input type="checkbox"/> NO IF YES, FURNISH DETAILED EXPLANATION Unknown																											
39. WAS THE INJURY CAUSED BY A THIRD PARTY? <input type="checkbox"/> YES <input type="checkbox"/> NO IF YES, FURNISH NAME AND ADDRESS OF RESPONSIBLE PARTY Unknown																											

40. DATE EMPLOYEE FIRST OBTAINED MEDICAL CARE FOR THE INJURY (Mo., day, year) Unknown	4
---	---

42. DOES YOUR KNOWLEDGE OF THE FACTS ABO
☐ YES ☐ NO IF NO, FURNISH DETAILED

This Agency was aware of

43.	
-----	--

Material sent to
☒ OFEC ☐ File

8-29-73

Date

JGC

GALE, JAMES H.

Name

b6

3/8/74

U.S. DEPARTMENT OF LABOR EMPLOYMENT STANDARDS ADMINISTRATION BUREAU OF EMPLOYEES' COMPENSATION		FEDERAL EMPLOYEE'S NOTICE OF INJURY OR OCCUPATIONAL DISEASE	
1. NAME OF INJURED EMPLOYEE (Last, first, middle)	2. DATE OF BIRTH (Mo., day, year)	3. <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE	4. SOCIAL SECURITY NUMBER
5. HOME MAILING ADDRESS (Number, street, city, state, zip code)			6. HOME TELEPHONE AREA CODE NUMBER
7. NAME AND ADDRESS OF EMPLOYING ESTABLISHMENT (Name, number, street, city, state, zip code)			
8. PLACE WHERE INJURY OCCURRED (e.g., 2nd floor, building 402, Andrews Air Force Base)			
9. DATE AND HOUR OF INJURY (Mo., day, year) <div style="text-align: right;"><input type="checkbox"/> AM <input type="checkbox"/> PM</div>	10. DATE OF THIS NOTICE (Mo., day, year)	11. OCCUPATION	
12. CAUSE OF INJURY (Describe how and why injury occurred)			
13. NATURE OF INJURY (Name part of body affected—fractured left leg, bruised right thumb, etc.)			
14. NAMES OF WITNESSES TO INJURY (If none, so state)			
15. IF THIS NOTICE WAS NOT GIVEN WITHIN 48 HOURS AFTER THE INJURY, EXPLAIN REASON FOR DELAY. IF EARLIER NOTICE WAS GIVEN VERBAL OR WRITTEN, STATE WHEN AND TO WHOM.			
I certify that the injury described above was sustained in the performance of my duties as an employee of the U.S. Government and that it was not caused by my willful misconduct, intention to bring about the injury or death of myself, or another, nor by my intoxication. I hereby make claim for compensation and medical treatment to which I may be entitled by reason of this injury.	16. SIGNATURE OF INJURED EMPLOYEE OR PERSON ACTING ON HIS BEHALF		
17. STATEMENT OF WITNESS: DESCRIBE WHAT YOU SAW, HEARD OR KNOW ABOUT THIS INJURY			
18. SIGNATURE OF WITNESS			19. DATE (Mo., day, year)

U.S. DEPARTMENT OF LABOR EMPLOYMENT STANDARDS ADMINISTRATION BUREAU OF EMPLOYEES' COMPENSATION		FEDERAL EMPLOYEE'S NOTICE OF INJURY OR OCCUPATIONAL DISEASE	
1. NAME OF INJURED EMPLOYEE (Last, first, middle) Gale, James Henry		2. DATE OF BIRTH (Mo., day, year) 9-28-21	3. <input checked="" type="checkbox"/> MALE <input type="checkbox"/> FEMALE
		4. SOCIAL SECURITY NUMBER 294-01-8383	
5. HOME MAILING ADDRESS (Number, street, city, state, zip code) 3307 Hooky Mount Road, Fairfax, Virginia, 22030		6. HOME TELEPHONE AREA CODE 703 NUMBER 273-1661	
7. NAME AND ADDRESS OF EMPLOYING ESTABLISHMENT (Name, number, street, city, state, zip code) Federal Bureau of Investigation, 9th & Penn. Avenue, Washington, D. C.			
8. PLACE WHERE INJURY OCCURRED (e.g., 2nd floor, building 402, Andrews Air Force Base) Original injury occurred at Piquette Bridge, Gary, Perry, Ohio, and aggravated at numerous other FBI plants throughout the country.			
9. DATE AND HOUR OF INJURY (Mo., day, year) 8-28-46 originally <input type="checkbox"/> AM <input type="checkbox"/> PM	10. DATE OF THIS NOTICE (Mo., day, year) 8-28-73	11. OCCUPATION Special Agent, Special Agent in Charge, Inspector, and Assistant Director - FBI	
12. CAUSE OF INJURY (Describe how and why injury occurred) Hearing loss occasioned by use of firearms in course of employment with the FBI. At first it was not known whether injury temporary or permanent. It is now known that injury is permanent and irreversible.			
13. NATURE OF INJURY (Name part of body affected—fractured left leg, bruised right thumb, etc.) Hearing loss—please see attached medical reports.			
14. NAMES OF WITNESSES TO INJURY (If none, so state) Original injury, Special Agent Fern G. Stattenbroker and Special Agent in Charge Duell C. Richardson.			
15. IF THIS NOTICE WAS NOT GIVEN WITHIN 48 HOURS AFTER THE INJURY, EXPLAIN REASON FOR DELAY. IF EARLIER NOTICE WAS GIVEN VERBAL OR WRITTEN, STATE WHEN AND TO WHOM. Please see attached material re C.A. 1 and 2 forms submitted in 1946			
I certify that the injury described above was sustained in the performance of my duties as an employee of the U.S. Government and that it was not caused by my willful misconduct, intention to bring about the injury or death of myself, or another, nor by my intoxication. I hereby make claim for compensation and medical treatment to which I may be entitled by reason of this injury.		16. SIGNATURE OF INJURED EMPLOYEE OR PERSON ACTING ON HIS BEHALF James H. Gale	
17. STATEMENT OF WITNESS: DESCRIBE WHAT YOU SAW, HEARD OR KNOW ABOUT THIS INJURY Please see witness reports in 1946 report.			
		18. SIGNATURE OF WITNESS	19. DATE (Mo., day, year) 8-20-73

CA-1 & 2

Rev. July, 1970

FEDERAL EMPLOYEE'S NOTICE OF INJURY OR OCCUPATIONAL DISEASE

20. DEPARTMENT OR AGENCY			21. BUREAU OR OFFICE																										
22. NAME AND MAILING ADDRESS OF REPORTING OFFICE (Name, number, street, city, state, zip code)																													
23. DATE REPORTING OFFICE RECEIVED NOTICE OF INJURY (Mo., day, year) <input type="checkbox"/> VERBAL <input type="checkbox"/> WRITTEN		24. NAME OF SUPERVISOR IN CHARGE WHEN INJURY OCCURRED		25. NAME AND TITLE OF PERSON TO WHOM NOTICE FIRST GIVEN																									
26. DATE AND HOUR OF INJURY (Mo., day, year) <input type="checkbox"/> AM <input type="checkbox"/> PM		27. CIRCLE DAY OF WEEK WHEN INJURY OCCURRED S M T W T F S		28. HOUR REGULAR WORK BEGINS <input type="checkbox"/> AM <input type="checkbox"/> PM																									
29. HOUR REGULAR WORK ENDS <input type="checkbox"/> AM <input type="checkbox"/> PM		30. NUMBER HOURS WORKED PER DAY		31. CIRCLE DAYS PAID PER WEEK S M T W T F S																									
32. DATE AND HOUR STOPPED WORK (Mo., day, year) <input type="checkbox"/> AM <input type="checkbox"/> PM		33. DATE AND HOUR PAY STOPPED (Mo., day, year) <input type="checkbox"/> AM <input type="checkbox"/> PM		34. DATE AND HOUR RETURNED TO WORK (Mo., day, year) <input type="checkbox"/> AM <input type="checkbox"/> PM																									
35. INCLUSIVE DATES EMPLOYEE RECEIVED PAY FOR THE PERIOD HE DID NOT WORK (Mo., day, year)																													
<table style="width: 100%; border: none;"><tr><td colspan="2">ANNUAL LEAVE</td><td colspan="2">SICK LEAVE</td><td colspan="2">OTHER</td></tr><tr><td>FROM</td><td>TO</td><td>FROM</td><td>TO</td><td>FROM</td><td>TO</td></tr><tr><td>FROM</td><td>TO</td><td>FROM</td><td>TO</td><td>FROM</td><td>TO</td></tr><tr><td>FROM</td><td>TO</td><td>FROM</td><td>TO</td><td>FROM</td><td>TO</td></tr></table>						ANNUAL LEAVE		SICK LEAVE		OTHER		FROM	TO	FROM	TO	FROM	TO	FROM	TO	FROM	TO	FROM	TO	FROM	TO	FROM	TO	FROM	TO
ANNUAL LEAVE		SICK LEAVE		OTHER																									
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36. WAS THE EMPLOYEE ENGAGED IN HIS USUAL OCCUPATION AT THE TIME THE INJURY OCCURRED? <input type="checkbox"/> YES <input type="checkbox"/> NO IF NO, FURNISH DETAILED EXPLANATION																													
37. WAS THE EMPLOYEE IN PERFORMANCE OF DUTY AT TIME OF INJURY? <input type="checkbox"/> YES <input type="checkbox"/> NO IF NO, FURNISH DETAILED EXPLANATION OR A COPY OF THE EMPLOYING ESTABLISHMENT'S INVESTIGATION REPORT																													
38. WAS THE INJURY CAUSED BY WILLFUL MISCONDUCT, INTOXICATION OR INTENT TO BRING ABOUT INJURY TO SELF OR ANOTHER? <input type="checkbox"/> YES <input type="checkbox"/> NO IF YES, FURNISH DETAILED EXPLANATION																													
39. WAS THE INJURY CAUSED BY A THIRD PARTY? <input type="checkbox"/> YES <input type="checkbox"/> NO IF YES, FURNISH NAME AND ADDRESS OF RESPONSIBLE PARTY																													
40. DATE EMPLOYEE FIRST OBTAINED MEDICAL CARE FOR THE INJURY (Mo., day, year)			41. NAME AND ADDRESS OF FIRST ATTENDING PHYSICIAN																										
42. DOES YOUR KNOWLEDGE OF THE FACTS ABOUT THIS INJURY AGREE WITH THE STATEMENTS OF THE EMPLOYEE AND/OR WITNESS? <input type="checkbox"/> YES <input type="checkbox"/> NO IF NO, FURNISH DETAILED EXPLANATION																													
43. SIGNATURE OF OFFICIAL SUPERIOR		44. TITLE			45. DATE (Mo., day, year)																								

U.S. DEPARTMENT OF LABOR
EMPLOYMENT STANDARDS ADMINISTRATION
OFFICE OF FEDERAL EMPLOYEES' COMPENSATION

NOTICE OF
RECURRENCE OF DISABILITY

IMPORTANT: BEFORE COMPLETING THIS FORM PLEASE READ CAREFULLY THE INSTRUCTIONS ON THE BACK.

1. NAME OF INJURED EMPLOYEE (last, first, middle) Gale, James Henry		2. SOCIAL SECURITY NUMBER 294-01-8383		3. OFEC file number for original injury (if known) X-253155	
4. HOME MAILING ADDRESS (include zip code) 3307 Rocky Mount Road, Fairfax, Virginia, 22030				5. HOME TELEPHONE Area Code 703 Number 273-1661	
6. NAME AND ADDRESS OF EMPLOYING ESTABLISHMENT at time of original injury (number, street, city, state, zip code) FBI, Cleveland, Ohio			7. NAME AND ADDRESS OF EMPLOYING ESTABLISHMENT at time of recurrence, if other than 6. FBI, Anchorage, Richmond, Cincinnati, Washington Field, Chicago, and Washington, D. C.		
8. DATE AND HOUR of original injury (mo., day, year) 11:04 8-20-46 <input type="checkbox"/> a.m. <input type="checkbox"/> p.m.		9. DATE AND HOUR of recurrence (mo., day, year) Over the years of my FBI career <input type="checkbox"/> a.m. <input type="checkbox"/> p.m.		10. DATE AND HOUR stopped work following recurrence (mo., day, year) Did Not stop <input type="checkbox"/> a.m. <input type="checkbox"/> p.m.	
11. DATE AND HOUR pay stopped following recurrence (mo., day, year) Did not stop <input type="checkbox"/> a.m. <input type="checkbox"/> p.m.					
12. PAY RATE IN EFFECT ON: Last several years of career					
A. Date of Recurrence		a. Base pay \$36,000 per annum	b. Subsistence	c. Quarters	d. Other pay
B. Date Stopped Work Following Recurrence		\$ per	\$ per	\$ per	\$ per
13. Show work week at time pay stopped, if other than Monday thru Friday S M T W T F S		14. DATE AND HOUR returned to work, following recurrence (mo., day, year) Not applicable <input type="checkbox"/> a.m. <input type="checkbox"/> p.m.		15. At time of recurrence did official superior authorize medical treatment? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
16. DATE employee first received medical treatment following recurrence (mo., day, year) Injury not capable of medical treatment		17. NAME AND ADDRESS of physician treating employee following recurrence Please see attached government and private physician reports.			
18. Describe the circumstances of the recurrence of disability as reported by the employee. If his condition gradually worsened over a period of time, describe the progress of the condition from the time he returned to work up to the date of recurrence. Continued exposure of firearms training over the years after initial injury in 1946 worsened condition of hearing loss according to physicians and my own personal knowledge. At first hearing loss thought to be possibly temporary. It is now known to be permanent and irreversible.					
19. After returning to work following the original injury, was the employee handicapped or in any way limited in performing his usual duties? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO (If yes, explain) Except that I had difficulty hearing.					
20. Signature of official superior (at time of recurrence)		21. Title		22. Official superior's work phone number	
				23. DATE (mo., day, year)	

INSTRUCTIONS FOR COMPLETING FORM CA-2a

RECURRENCE OF DISABILITY

Definition of Recurrence: When, after returning to work, an injured employee is again disabled and stops work as a result of the original injury or occupational disease, such disability is considered by OFEC to be a recurrence. In these instances a form CA-2a is required. If a new incident occurs, the matter should be treated as a new injury and form CA-1 & 2, etc., submitted accordingly.

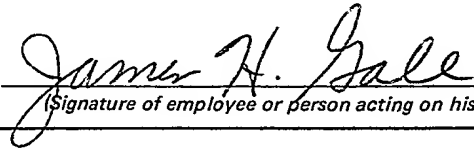
1. Form CA-2a should be submitted promptly by the official superior upon receiving notice that the employee has suffered a recurrence.
2. If the original injury was not previously reported to OFEC, a report specifically covering the original injury should be made on form CA-1 & 2 and attached when form CA-2a is submitted. Medical reports concerning the original injury should also be attached, if not previously submitted.
3. When the employee has received medical care as a result of the recurrence, a detailed medical report should be submitted by the attending physician. The report should include: dates of examination and treatment; history given by the employee; findings; results of x-ray and lab tests; diagnosis; course of treatment, and the physician's opinion, with medical reasons, regarding causal relationship between employee's condition and the original injury.

If the employee was treated by other physicians after returning to work following his original injury, similar medical reports should be obtained from each.

4. If the recurrence happened six months or more after the employee returned to duty following the original injury, A STATEMENT FROM

THE EMPLOYEE SHOULD ACCOMPANY THE FORM CA-2a. The statement should describe the employee's duties upon his return to work, state whether he had any other injuries or illness and give a general description of his physical condition during the intervening period.

5. If the employee wishes to claim compensation as a result of the recurrence and a form CA-4 was not submitted following the original injury one should be submitted at this time. If form CA-4 was previously filed, compensation may be claimed by filing form CA-8. A medical report on form CA-20 (or in narrative form) must also be completed in accordance with the applicable instructions.
6. If the recurrent disability has not ended at the time form CA-2a is submitted, form CA-3, Termination of Disability, should be forwarded when the employee returns to work.
7. In the event the employee is not able to return to his same duties and suffers pay loss as a result of his disability, he may be entitled to additional compensation based on loss of wages, or loss of wage earning capacity. Upon notification of such loss, OFEC will advise the employee of the procedure to follow to claim additional compensation.

U. S. DEPARTMENT OF LABOR EMPLOYMENT STANDARDS ADMINISTRATION BUREAU OF EMPLOYEES' COMPENSATION		CLAIM FOR COMPENSATION ON ACCOUNT OF INJURY OR OCCUPATIONAL DISEASE	
1. NAME OF INJURED EMPLOYEE (Last, first, middle) Gale, James Henry		2. HOME MAILING ADDRESS (Number, street, city, state, zip code) 3307 Rocky Mount Road, Fairfax, Virginia 22030	
3. DATE AND HOUR OF INJURY (Mo., day, year) 8-20-70 and aggravated over 11 years of FBI career		4. PERIOD COMPENSATION IS CLAIMED AS A RESULT OF PAY LOSS (Mo., day, year) FROM Scheduled Permanent Impairment	
5. HAS ANY PAY BEEN RECEIVED FOR THE PERIOD SHOWN IN ITEM 4? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO IF YES, STATE FULL AMOUNT AND SHOW INCLUSIVE DATES DURING WHICH PAY WAS RECEIVED (Mo., day, year)			
AMOUNT \$		DATES: FROM TO	
6. HAS CLAIM BEEN MADE AGAINST ANY THIRD PARTY FOR DAMAGES AS A RESULT OF THIS INJURY? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO IF YES, FURNISH →		A. NAME AND ADDRESS OF THIRD PARTY	
7. WERE YOU EVER IN THE ARMED FORCES OF THE UNITED STATES? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO IF YES, FURNISH →		B. SERVICE NUMBER 940-72-44	B. BRANCH OF SERVICE U. S. Navy
8. IF ANSWER TO 7 IS YES, HAVE YOU APPLIED FOR OR RECEIVED COMPENSATION OR PENSION, INCLUDING RETIREMENT OR RETAINER PAY, BASED ON SUCH SERVICES? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO IF YES, FURNISH →		C. PERIOD OF SERVICE FROM 8-44 THROUGH 2-46	C. NATURE OF DISABILITY AND MONTHLY PAYMENT RECEIVED
9. HAVE YOU APPLIED FOR OR RECEIVED AN ANNUITY UNDER THE U.S. CIVIL SERVICE RETIREMENT ACT OR ANY OTHER FEDERAL RETIREMENT OR DISABILITY LAW? Regular FBI retirement upon reaching 50 Yr. with over 20 years of service.		A. CLAIM NUMBER 13546920	B. DATE ANNUITY BEGAN (Mo., day, year) 10-1-71
		C. AMOUNT OF MONTHLY PAYMENT \$1883.00	
10. LIST YOUR DEPENDENTS (If none so state)		IS DEPENDENT LIVING WITH YOU? YES NO IF NOT, SHOW MAILING ADDRESS	
		<input checked="" type="checkbox"/> YES	
		<input type="checkbox"/> NO	
11. FOR DEPENDENTS NOT LIVING WITH YOU, SHOW AMOUNTS THAT YOU PAY FOR THEIR SUPPORT, TO WHOM PAID, AND PAYEE'S ADDRESS. STATE WHETHER SUCH PAYMENTS WERE ORDERED BY A COURT.			
12. I hereby make claim for compensation on account of the injury described above, which was sustained by me while in the performance of my duty for the United States, said injury not being due to willful misconduct on my part or to my intention to bring about the injury or death of myself or another, or to my intoxication. I have been disabled on account of this injury and have not refused or failed to perform any work I was able to do during the period for which compensation is claimed and every statement set forth above in support of my claim is true to the best of my knowledge and belief.			
 (Signature of employee or person acting on his behalf)		8-20-73 (Date)	

STATEMENT OF OFFICIAL SUPERIOR							
13. NAME AND MAILING ADDRESS OF REPORTING OFFICE (<i>Name, number, street, city, state, zip code</i>)						14. DATE AND HOUR PAY STOPPED <i>(Mo, day, year)</i> <input type="checkbox"/> AM <input type="checkbox"/> PM	
15. PAY RATE AS OF:		BASE PAY		SUBSISTENCE		QUARTERS	
A. DATE OF INJURY	\$ PER	\$ PER	\$ PER	\$ PER			
B. DATE EMPLOYEE STOPPED WORK	\$ PER	\$ PER	\$ PER	\$ PER			
C. DATE OF RECURRENCE (<i>if any</i>)	\$ PER	\$ PER	\$ PER	\$ PER			
16. IF EMPLOYEE RECEIVES OTHER ADDITIONAL PAY, SUCH AS PREMIUM, SUNDAY, OR NIGHT DIFFERENTIAL IDENTIFY TYPE AND SHOW AMOUNT. TYPE \$ PER				17. SHOW WORKWEEK AT TIME PAY STOPPED IF OTHER THAN MONDAY THROUGH FRIDAY S M T W T F S			
18. SHOW INCLUSIVE DATES EMPLOYEE RECEIVED PAY FOR ANY PART OF THE PERIOD SHOWN IN 4 ON THE FRONT OF THIS FORM							
ANNUAL LEAVE:		SICK LEAVE:		OTHER			
FROM	TO	FROM	TO	FROM	TO		
19. DID THE EMPLOYEE WORK IN THE POSITION HELD AT THE TIME OF INJURY FOR A FULL ELEVEN MONTHS IMMEDIATELY PRIOR TO THE INJURY? <input type="checkbox"/> YES <input type="checkbox"/> NO				20. IF ANSWER TO 19 IS NO, WOULD THE POSITION HAVE AFFORDED EMPLOYMENT FOR ELEVEN MONTHS EXCEPT FOR THE INJURY? <input type="checkbox"/> YES <input type="checkbox"/> NO			
21. HEALTH BENEFIT SUBSCRIPTIONS							
A. WAS EMPLOYEE ENROLLED IN A HEALTH BENEFITS PLAN ON DATE PAY STOPPED? <input type="checkbox"/> YES <input type="checkbox"/> NO							
B. IF ANSWER TO A IS YES, FURNISH ENROLLMENT CODE NUMBER []							
C. IF ANSWER TO A IS YES, SHOW ENDING DATE OF PAY PERIOD THROUGH WHICH DEDUCTIONS WERE LAST MADE (<i>Mo, day, year</i>)							
22. FEDERAL EMPLOYEE'S OPTIONAL GROUP LIFE INSURANCE							
A. WAS EMPLOYEE ENROLLED IN OPTIONAL INSURANCE ON DATE OF INJURY? <input type="checkbox"/> YES <input type="checkbox"/> NO							
B. IF ANSWER TO A IS YES, FURNISH ENROLLMENT CODE NUMBER []							
C. IF ANSWER TO A IS YES, SHOW ENDING DATE OF PAY PERIOD THROUGH WHICH DEDUCTIONS WERE LAST MADE (<i>Mo, day, year</i>)							
23. (check one) <input type="checkbox"/> EMPLOYEE HAS NOT RETURNED TO WORK <input type="checkbox"/> EMPLOYEE HAS RETURNED TO WORK (if this box is checked complete items 24 through 27)							
24. DATE AND HOUR RETURNED TO WORK <i>(Mo, day, year)</i> <div style="text-align: right;"><input type="checkbox"/> AM <input type="checkbox"/> PM</div>				25. SHOW EMPLOYEE'S WORKWEEK ON RETURN TO DUTY IF OTHER THAN MONDAY THROUGH FRIDAY S M T W T F S			
26. SHOW EMPLOYEE'S RATE OF PAY ON RETURN TO DUTY							
BASE PAY		SUBSISTENCE		QUARTERS		OTHER	
\$ PER	\$ PER	\$ PER	\$ PER	\$ PER	\$ PER		
27. DID THE RESULTS OF THE INJURY REQUIRE A CHANGE IN THE EMPLOYEE'S WORK ASSIGNMENT ON RETURN TO DUTY?				A. DESCRIBE TYPE OF WORK EMPLOYEE IS NOW PERFORMING			
<input type="checkbox"/> YES <input type="checkbox"/> NO (if yes, complete A) →							
28. I HEREBY CERTIFY THAT THE EMPLOYEE WHO COMPLETED THE CLAIM FOR COMPENSATION ON THE FRONT OF THIS FORM WAS INJURED IN PERFORMANCE OF HIS DUTIES FOR THE UNITED STATES. INFORMATION FURNISHED BY THE EMPLOYEE IS TRUE AND CORRECT WITH THE FOLLOWING EXCEPTIONS.							
29. SIGNATURE OF OFFICIAL SUPERIOR				30. TITLE		31. DATE (<i>Mo, day, year</i>)	

D. D. Moffett, M. D.; James J. McFarland, M. D.

Blair Webb, M. D.; Robert E. Pumphrey, M. D.

2141 K Street, N.W.

Washington, D. C. 20037

AUDIOLOGICAL RECORD

NAME Gall, Ann. James

DATE 8-1-73

AGE _____

TESTER Betty Wilson

DOCTOR'S
NAME

Dr. Webb

AUDIOMETER Belfone Series 14

ISO

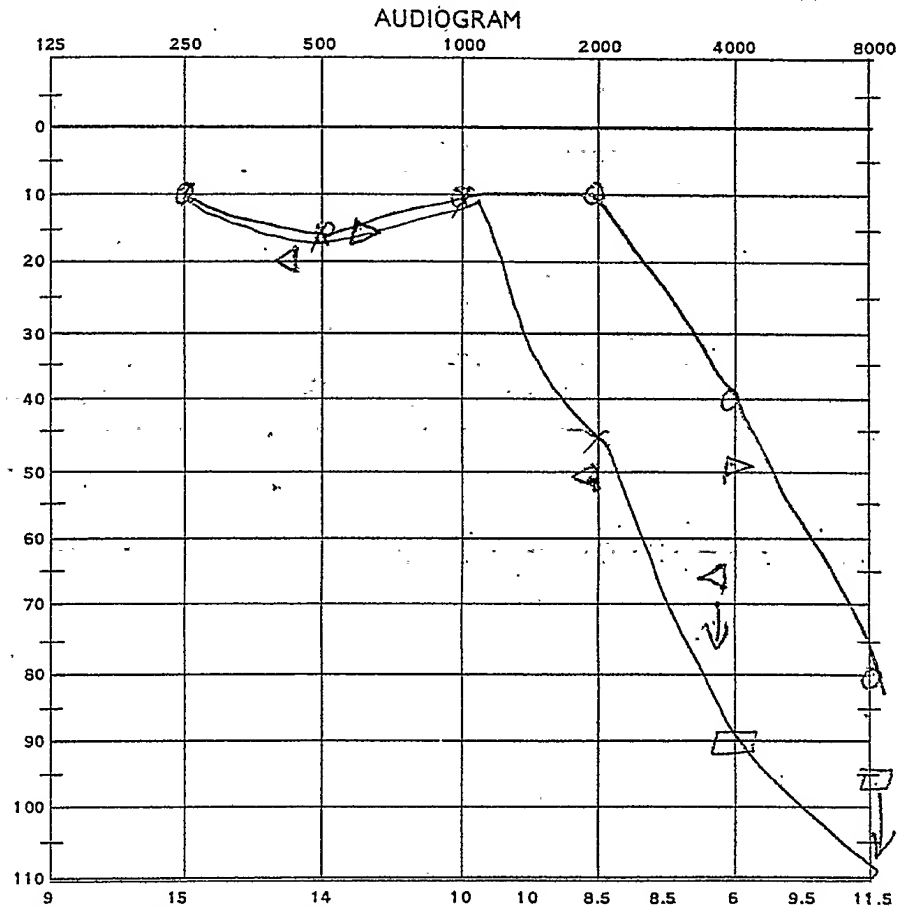
	PURE TONE AVERAGE	SPEECH RECEPT THRESH
R.	<u>12</u>	<u>15</u>
L.	<u>25</u>	<u>24</u>
BIN.		

	PB. (QUIET)	PRESENTA- TION LEVEL
R.	<u>40</u>	
L.	<u>42</u>	
BIN.		

	PB. (NOISE)	PRESENTA- TION LEVEL
R.		
L.		
BIN.		

	AIR	BONE	BEST BONE	COLOR
R	O-O	[-[□-□	RED
L	X-X]-]		BLUE

HEARING-THRESHOLD LEVEL IN DECIBELS-INTERNATIONAL STANDARD SCALE



Difference in dB ISO vs. ASA
To convert Hearing Level to ASA, make hearing better by these amounts

MASKING USED ON NON-TEST EAR	BC	L	R	L	R	L	R	L	R	L	R	BC
	AC											AC

Test Reliability: Good

Remarks:

Recommendations:

Assoc. Dir. _____

Dep. AD Adm. _____

Dep. AD Inv. _____

Asst. Dir.:

Admin. _____

Comp. Syst. _____

Ext. Affairs _____

Files & Com. _____

Gen. Inv. _____

Ident. _____

Inspection _____

Intell. _____

Laboratory _____

Legal Coun. _____

Plan. & Eval. _____

Spec. Inv. _____

Training _____

Telephone Rm. _____

Director Sec'y _____

Portkurt, Moskos & Gale

Attorneys at Law

Thomas A. Portkurt
Arthur L. Moskos
James H. Gale

November 22, 1974

Suite 416, The Mosby
10560 Main Street
Fairfax, Virginia 22030
Telephone (703) 591-2151

Mr. Clarence Kelley, Director
Federal Bureau of Investigation
U. S. Department of Justice
9th and Pennsylvania Ave.
Washington, D. C.

Dear Clarence:

I read with a great deal of interest your statements to the Press regarding the defense of the Federal Bureau of Investigation insofar as the Co-Intelpro was concerned, and I want to strongly compliment you on the stand which you took. While this program was not in my bailiwick while I was in the F.B.I., I nevertheless feel just as you do, that the Bureau did the right thing.

Your courage in taking issue with the Attorney General was certainly refreshing, and I have talked to a number of former officials who likewise admire your stand and the courage it took to take such a stand. In my opinion you definitely added greatly to your stature as Director of the Federal Bureau of Investigation by the action you took in this matter.

With cordial good wishes, I am

Sincerely,

JAMES H. GALE

JHG:lrp

ack
12-2-74
Jaw:jac

1 Xerox made & sent to Director 11-25-74

Assistant Director
Administrative Services Division

9/20/78

Legal Counsel

**HOUSE SELECT COMMITTEE
ON ASSASSINATIONS (HSCA)**

PURPOSE:

The purpose of this memorandum is to advise of the request made by captioned Committee that former Assistant Director James H. Gale be released from his employment agreement and former Inspector James R. Malley and Gale testify before captioned Committee in connection with the assassination of President Kennedy.

DETAILS:

By letter dated 9/18/78, (copy attached), G. Robert Blakey, Chief Counsel and Director of captioned Committee requested the testimony of James H. Gale (former Assistant Director) in public session, on 9/20/78.

Mr. Gale prior to the interview will be contacted by a representative of the Legal Counsel Division who will advise him that he has been released from his employment agreement and will also provide him with a briefing as to the scope and limitations of the interview.

James R. Malley (former Inspector) has already been released and briefed as to the scope and limitations of the interview.

RECOMMENDATION:

None. For information

Enclosure

- 1 - Mr. Foster
- 1 - Personnel file of James H. Gale
- 1 - Personnel file of James R. Malley
- 1 - Mr. Mintz
- 2 - Mr.
- 1 - Mr. Heller

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104
67-NOV RECORDED
9 SEP 25 1978

LOUIS STOKES, OHIO, CHAIRMAN
RICHARDSON PRETZER, N.C.
WALTER E. FAUNTROY, D.C.
YVONNE BRATHWAITE BURKE, CALIF.
CHRISTOPHER J. DODD, CONN.
HAROLD E. FORD, TENN.
FLOYD J. FITHIAN, IND.
ROBERT W. EDGAR, PA.
SAMUEL A. BROWN, OHIO
STEWART L. ICKINNEY, CONN.
CHARLES THONE, NEBR.
HAROLD S. SAWYER, MICH.

Select Committee on Assassinations

U.S. House of Representatives

3369 HOUSE OFFICE BUILDING, ANNEX 2

WASHINGTON, D.C. 20515

September 18, 1978

The Honorable Griffin B. Bell
Attorney General of the United States
Department of Justice
Washington, D. C. 20305

Attention: Mr. Robert L. Keuch
Deputy Assistant Attorney General
Criminal Division

Dear Mr. Attorney General:

In connection with its investigation into the circumstances surrounding the assassination of President Kennedy, the House Select Committee has scheduled former Federal Bureau of Investigation employees James R. Malley and James H. Gale to testify before the Select Committee in public session on September 20, 1978.

Sincerely,

G. Robert Blakey

G. Robert Blakey
Chief Counsel and Director

grb:rgr

CC: Mr. Ron Heller, Special Agent
Federal Bureau of Investigation
J. Edgar Hoover Building, Room 3659
Washington, D. C. 20305

Mr. J. B. Adams

Legal Counsel

1 - Mr. Mintz
1 - Mr. Wannall
1 - Mr. Cregar
12/8/75
1 - Mr. Hotis
1 - Mr. Daly

FOUO STUDY

Staff Member [redacted] of the House Select Committee requested that the following former Bureau personnel be made available for interview by Staff Members of that Committee concerning any knowledge they may possess pertaining to the Bureau's purchasing practice with the U.S. Recording Company:

Former Executive Assistant to the Associate Director
Rufus Beaver;
Former SAC Thomas Farrow;
Former Assistant Director James Gale;
Former SA [redacted]
Former Assistant Director Odd T. Jacobson;
Former Inspector Norman McDaniel;
Former Inspector Donald E. Moore;
Former Deputy Assistant Director Paul O'Connell;
Former Assistant to the Director Al Rosen;
Former Assistant Director William Sawyers;
Former SA C. Q. Smith;
Former SAC Victor Turyn; and
Former Assistant Director Leonard M. Walters.

The Intelligence Division has been orally advised of this request.

1 - Personnel File - [redacted]
1 - Personnel File - Thomas Farrow
1 - Personnel File - James Gale
1 - Personnel File - William Goodwin
1 - Personnel File - Odd T. Jacobson
1 - Personnel File - Norman McDaniel
1 - Personnel File - Donald E. Moore
1 - Personnel File - Paul O'Connell
1 - Personnel File - Al Rosen
1 - Personnel File - William Sawyers
1 - Personnel File - C. Q. Smith
1 - Personnel File - Victor Turyn
1 - Personnel File - Leonard M. Walters

RECOMMENDATIONS - OVER

TVD:lad
10 (20) 10 1975

Legal Counsel to Mr. Adams
RE: HOUSTUDY

RECOMMENDATIONS:

(1) That the aforementioned former Bureau personnel be released from any existing employment agreement for purposes of Staff interview by the House Select Committee concerning their knowledge of the Bureau's purchases from the U.S. Recording Company.

(2) That the Intelligence Division determine the last known addresses of former Bureau personnel as contained in Bureau files and insure that the former personnel are alerted to the fact that they may be contacted by representatives of the House Select Committee.

(3) That the Legal Counsel Division will orally furnish the last known residence of the aforementioned former personnel.

NR 005 AX CODE

FEDERAL BUREAU OF INVESTIGATION
COMMUNICATIONS SECTION

601 PM NITEL SEPT. 8, 1975 VAN SEP 08 1975

TO: DIRECTOR (62-116395)
FROM: ALEXANDRIA (62-217) (UC)

SENSTUDY, 1975.

RE BUREAU NITEL, SEPTEMBER 5, 1975 AND ALEXANDRIA TELETYPE
BUREAU AND SAN DIEGO, SEPTEMBER 8, 1975.

ON SEPTEMBER 8, 1975, FORMER EMPLOYEES W. DONALD STEWART
AND JAMES H. GALE WERE CONTACTED BY ASAC MICHAEL A. MORROW
IN ACCORDANCE WITH BUREAU INSTRUCTIONS AND FURNISHED
INFORMATION SET OUT IN REFERENCED TELETYPE.

FORMER SA STEWART COMMENTED HE WAS IN CONCERT WITH THE
BUREAU'S THINKING IN THIS MATTER AND PLANS TO CONTACT LEGAL
COUNSEL IF HE IS CONTACTED. MR. GALE ADVISED HE INTENDED
TO CONTACT HEADQUARTERS PERSONNEL REGARDING THIS.

END.

GHS FBHQ CLR FOR 2

Assoc. Dir.	_____
Dep.-A.D.-Adm.	_____
Dep.-A.D.-Inv.	_____
Asst. Dir.:	_____
Admin.	_____
Comp. Syst.	_____
Ext. Affairs	_____
Files & Com.	_____
Gen. Inv.	_____
Ident.	_____
Inspection	_____
Intell.	_____
Laboratory	_____
Plan. & Eval.	_____
Spec. Inv.	_____
Training	_____
Legal Coun.	_____
Telephone Rm.	_____
Director Sec'y	_____

Handwritten signature/initials

Handwritten "D"

Handwritten signatures: "Recond", "Stewart", "Gale"

ST. 100

REC-16

62-116395-154
5 SEP 16 1975
Handwritten initials and stamps

4 SEP 17 1975

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CIDE

TELETYPE

NITEL

TL ALEXANDRIA
 BALTIMORE
 BIRMINGHAM
 BOSTON
 CHICAGO
 CINCINNATI
 DALLAS
 EL PASO
 INDIANAPOLIS
 JACKSON
 JACKSONVILLE
 LOUISVILLE
 LOS ANGELES
 MEMPHIS
 MIAMI
 NEW YORK
 OKLAHOMA CITY
 OMAHA
 PHILADELPHIA
 PHOENIX
 ST. LOUIS
 SAN DIEGO
 SAN FRANCISCO
 SAVANNAH
 SEATTLE

SEPTEMBER 5, 1975

PERSONAL ATTENTION

Gale, James H.

- 1 - Mr. J. A. Mintz
- 1 - Mr. W. R. Wannall
- 1 - Mr. W. O. Cregar
- 1 - Mr. S. F. Phillips

GENERAL INVESTIGATIVE DIVISION
COMMUNICATIONS SECTION

SEP 5 1975

TELETYPE

REC-47

62-116395-2

FROM DIRECTOR (62-116395)

SENSTUDY 75

REBUTELS MAY 2, 1975, AND SEPTEMBER 4, 1975.

21 SEP 9 1975

- Assoc. Dir. _____
- Dep. AD Adm. _____
- Dep. AD Inv. _____
- Asst. Dir.:
- Admin. _____
- Comp. Syst. _____
- Ext. Affairs _____
- Files & Com. _____
- Gen. Inv. _____
- Ident. _____
- Inspection _____
- Intell. _____
- Laboratory _____
- Plan. & Eval. _____

SFP:eks
(6)

ST-113

SEE NOTE PAGE 9

Spec. Inv. _____
 Training _____
 Legal Coun. _____
 Telephone Rm. _____
 Director Sec'y _____

3 APR 21 1976
 MAIL ROOM ☐ TELETYPE UNIT ☒

PAGE 1

SENATE SELECT COMMITTEE (SSC) HAS REQUESTED WHEREABOUTS OF A NUMBER OF FORMER FBI EMPLOYEES INDICATING THEY MAY BE INTERVIEWED BY THE SSC STAFF. LISTED BELOW, BY FIELD OFFICE TERRITORY, ARE THESE FORMER EMPLOYEES AND THEIR LAST KNOWN ADDRESSES AS CONTAINED IN BUREAU FILES.

INFORMATION FROM SSC INDICATES NAMES OF FORMER SAs LITRENTA AND STEWART DEVELOPED AS HAVING BEEN RESPONSIBLE FOR SUPERVISING COMMUNICATIONS BETWEEN THE FBI AND CIA CONCERNING MAIL OPENING ACTIVITIES. ALL OTHERS IN LIST BELOW WERE EITHER SAC, ASAC, OR BOTH, DURING PERIOD 1959 - 1966 IN ONE OR MORE OF THE FOLLOWING OFFICES: BOSTON, DETROIT, LOS ANGELES, MIAMI, NEW YORK, SAN FRANCISCO, SEATTLE, AND WASHINGTON FIELD. THEY PRESUMABLY ARE ALSO KNOWLEDGEABLE CONCERNING MAIL OPENINGS.

EACH OF THESE FORMER EMPLOYEES IS TO BE IMMEDIATELY CONTACTED AND ALERTED THAT HE MIGHT BE APPROACHED BY THE SSC STAFF FOR INTERVIEW. THE FORMER EMPLOYEE MAY, AFTER BEING CONTACTED BY SSC STAFF, CONTACT BUREAU'S LEGAL COUNSEL DIVISION BY COLLECT CALL FOR FULL INFORMATION TO ASSIST HIM INCLUDING OBLIGATIONS AS TO CONFIDENTIALITY OF INFORMATION ACQUIRED AS

PAGE 3

FBI EMPLOYEE. IT IS EMPHASIZED THAT BUREAU'S OFFER OF ASSISTANCE IS NOT INTENDED TO IMPEDE SSC WORK, BUT IS DONE AS COOPERATIVE GESTURE AND TO SAFEGUARD SENSITIVE BUREAU INFORMATION.

CONTACTS WITH THESE FORMER EMPLOYEES TO BE HANDLED PERSONALLY BY SAC OR ASAC. IN EVENT THIS IS NOT FEASIBLE FOR JUST CAUSE, TO BE HANDLED BY A SENIOR SUPERVISOR.

IMMEDIATELY AFTER CONTACT, RESULTS SHOULD BE FURNISHED BUREAU BY NITEL IN ABOVE CAPTION, BRIEFLY INCLUDING REACTION OF FORMER EMPLOYEES CONTACTED. IF A FORMER EMPLOYEE NO LONGER IN YOUR TERRITORY OR TEMPORARILY AWAY, SET OUT LEAD TO OTHER OFFICE IMMEDIATELY WITH COPY TO FBIHQ.
ALEXANDRIA.

W. DONALD STEWART, CRYSTAL HOUSE I, APARTMENT 202,
ARLINGTON, VIRGINIA

JAMES H. GALE, 3307 ROCKY MOUNT ROAD, FAIRFAX, VIRGINIA
22031

THOMAS E. BISHOP, 8820 STARK ROAD, ANNANDALE, VIRGINIA

PAGE 4

BALTIMORE:

ANTHONY P. LITRENTO, 2810 STONYBROOK DRIVE, BOWIE, MARYLAND

PAUL O'CONNELL, JR., [REDACTED] MARYLAND

DONALD E. RONEY, 131 CAMBRIDGE DRIVE, WINDSOR HILLS,
WILMINGTON, DELAWARE

b6

VICTOR TURYN, [REDACTED]

MARYLAND

DONALD W. MORLEY, [REDACTED] MARYLAND

BIRMINGHAM:

JOHN DAVID POPE, JR., 221 REMINGTON ROAD, BIRMINGHAM,

ALABAMA

BOSTON:

LEO L. LAUGHLIN, 9 EVERETT AVENUE, WINCHESTER, MASSACHUSETTS

EDWARD J. POWERS, 10 COLONIAL DRIVE, BEDFORD,

NEW HAMPSHIRE

J. F. DESMOND, 185 FRANKLIN STREET, BOSTON, MASSACHUSETTS

PAGE 5

CHICAGO:

MARLIN W. JOHNSON, CANTEEN CORPORATION, THE MERCHANDISE
MART, CHICAGO, ILLINOIS

HARVEY G. FOSTER, 1012 SOUTH HAMLIN, PARK RIDGE, ILLINOIS

CINCINNATI:

PAUL FIELDS, 2677 CYCLOPAMA DRIVE, CINCINNATI, OHIO

HARRY J. MORGAN, 5314 ELMCREST LANE, CINCINNATI, OHIO

DALLAS:

PAUL H. STODDARD, 3014 CHATTERTON DRIVE, SAN ANGELO, TEXAS

KENNETH E. COMMONS, 2458 DOUGLAS DRIVE, SAN ANGELO, TEXAS

EL PASO:

KARL W. DISSLY, [REDACTED] TEXAS

b6

INDIANAPOLIS:

DILLARD W. HOWELL, 6413 CARDINAL LANE, INDIANAPOLIS,

INDIANA

ALLAN GILLIES, [REDACTED] INDIANA

JACKSON:

WILLIAMS W. BURKE, JR., 1847 AZTEC DRIVE, JACKSON,

MISSISSIPPI

PAGE 5

JACKSONVILLE:

DONALD K. BROWN, 826 BROOKMONT AVENUE, EAST JACKSONVILLE,
FLORIDA

WILLIAM M. ALEXANDER, 4857 WATER OAK LANE, JACKSONVILLE,
FLORIDA

LOUISVILLE:

BERNARD C. BROWN, 2301 NEWMARKET DRIVE, N.E., LOUISVILLE,
KENTUCKY

LOS ANGELES:

WILLIAM G. SIMON, 2075 LOMBARDY ROAD, SAN MARINO,
CALIFORNIA

WESLEY G. GRAPP, 4240

[REDACTED]

b6

CALIFORNIA

ARNOLD C. LARSON,

[REDACTED]

CALIFORNIA

JOSEPH K. PONDER, 3719 CARRIAGE HOUSE COURT, ALEXANDRIA,
VIRGINIA. BUSINESS ADDRESS: 3030 SOUTH RED HILL AVENUE,
SANTA ANA, CALIFORNIA

PAGE 7

MEMPHIS:

E. HUGO WINTERROWD, 1550 NORTH PARKWAY, MEMPHIS, TENNESSEE

MIAMI:

THOMAS MC ANDREWS, 324 NEAPOLITAN WAY, NAPLES, FLORIDA

FREDERICK F. FOX, 11450 W. BISCAYNE CANAL ROAD, MIAMI,
FLORIDA

NEW YORK:

JOSEPH L. SCHMIT, 656 HUNT LANE, MANHASSET, NEW YORK

HENRY A. FITZGIBBON, 76 EASTON ROAD, BRONXVILLE, NEW YORK

OKLAHOMA CITY:

JAMES T. MORELAND, 108 FERN DRIVE, POTEAU, OKLAHOMA

LEE G. TEAGUE, 2501 N.W. 121ST STREET, OKLAHOMA CITY,

OKLAHOMA

MAHA:

JOHN F. CALLAGHAN, IOWA LAW ENFORCEMENT ACADEMY,

CAMP DODGE,

IOWA

b6

PAGE 3

PHILADELPHIA:

RICHARD J. BAKER, [REDACTED]

PENNSYLVANIA

b6

JOHN F. MALONE, 25 GARFIELD AVENUE, CARBONDALE, PENNSYLVANIA

PHOENIX:

PALMER M. BAKEN, JR., [REDACTED]

ARIZONA

ST. LOUIS:

THOMAS J. GEARTY, [REDACTED]

MISSOURI

b6

WESLEY T. WHALEY, 286 GREEN TRAILS DRIVE, CHESTERFIELD,

MISSOURI

SAN DIEGO:

FRANK L. PRICE, 2705 TOKALON STREET, SAN DIEGO, CALIFORNIA

SAN FRANCISCO:

CURTIS O. LYNUM, 644 EAST HILLSDALE BOULEVARD,

SAN MATEO, CALIFORNIA

HAROLD E. WELBORN, [REDACTED]

b6

CALIFORNIA

PAGE 2

SAVANNAH:

TROY COLEMAN, 36 CROMWELL ROAD, WILMINGTON PARK,
SAVANNAH, GEORGIA

JOSEPH D. PURVIS, 721 DANCY AVENUE, SAVANNAH, GEORGIA

SEATTLE:

LELAND V. BOARDMAN, ROUTE 3, BOX 268, SEQUIM, WASHINGTON

RICHARD D. AUERBACH, P. O. BOX 1768, SEATTLE, WASHINGTON

JAMES E. MILNES, 4317 - 50TH AVENUE, N.E., SEATTLE,
WASHINGTON

PAUL R. BIBLER, 15134 - 38TH AVENUE, N.E., SEATTLE,
WASHINGTON

NOTE:

Referenced Bureau teletypes furnished field general background and instructions relating to our cooperation with the SSC and procedures concerning interviews of current and former employees. Former employees listed herein derived from an SSC request dated 8/19/75, to which we have responded by LHM 9/5/75 being furnished the SSC through the AG. After dispatch of instant teletype, we will arrange for copies to be filed in the respective personnel files of the former employees listed.

December 3, 1974

James H. Gale, Esq.
Fortkort, Moshos and Gale
Suite 416, The Mosby
10560 Main Street
Fairfax, Virginia 22030

Dear Jim:

It is certainly reassuring to know I have the support of former officials of the Bureau concerning the release by Mr. [] of the report regarding counterintelligence programs. Thank you for taking the time to write and comment as you did. It was good to hear from you again.

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With warmest personal regards,

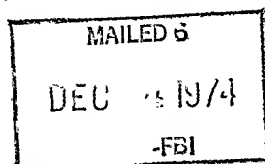
Sincerely,
Clarence Kelley

1 - Alexandria - Enclosure b6
1 - Mr. [] - Enclosure

NOTE: Mr. Gale is a former Assistant Director who EOD 11-29-39 and retired 10-1-71.

JCW:jac (5)

Assoc. Dir. _____
Dep. AD Adm. _____
Dep. AD Inv. _____
Asst. Dir.:
Admin. _____
Comp. Syst. _____
Ext. Affairs _____
Files & Com. _____
Gen. Inv. _____
Ident. _____
Inspection _____
Intell. _____
Laboratory _____
Plan. & Eval. _____
Spec. Inv. _____
Training _____
Legal Coun. _____
Telephone Rm. _____
Director Sec'y _____



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